

RECEIVED CENTRAL FAX CENTER

SEP 20 2006

## TOWER BUILDING 8023 Vantage Drive San Antonio, TX 78230 **FAX COVER SHEET**

CONFIDENTIALITY NOTICE: The documents accompanying this telecopy transmission contain confidential information which is legally privileged. The information is intended only for the use of the recipient named below. If you have received this telecopy in error, please immediately notify us by telephone, to arrange for return of the original documents to us, and you are hereby notified that any disclosure, copying distribution, or the taking of any action in reliance on the contents of this telecopied information is strictly prohibited.

Date:

20 September 2006

No. of Pages: 93

TO:

**Examiner Carolyn Brown** 

COMPANY: USPTO

FAX:

Robert W. Mason/cer

FROM:

Robert W. Mason

**DEPARTMENT:** 

Legal

FAX:

210 255 6969

PHONE:

210 255 6271

Message:

Re:

Application No. 09/458,280

Attorney Docket No.: VAC.331A.US

**Technical Center 3700** 

### Dear Ms. Brown:

Per our telephone conversation today, attached please find the following:

| 1.          | Filing Receipt              | 01/24/00        |
|-------------|-----------------------------|-----------------|
| 2.          | Office Action               | 10/04/00        |
| 3.          | On Petition                 | 08/06/02        |
| 4.          | Notice Regarding POA        | 08/15/02        |
| <b>5</b> .  | Office Action               | 10/21/02        |
| 6.          | Office Action               | 03/03/03        |
| <b>7.</b>   | Notice of Non-Recordation   | 05/22/03        |
| 8.          | Notice of Recordation/Assig | nment 05/22/03  |
| 9.          | Office Action               | 11/24/03        |
| 10.         | Notice of Allowance & Fees  | Due12/27/04     |
| 11.         | On Petition                 | 02/18/05        |
| 12.         | Notice of Allowance & Fees  | Due 06/01/05    |
| 13.         | Notice Under 37 CFR 1.251   | 06/23/06        |
| 14.         | Various Auto-Reply Facsimi  | le Transmission |
| <b>15</b> . | Various Return Postcards    |                 |

I:\mfg\Cheric\Fax Cover Sheets\USPTO Fax Cover Sheets\VAC.331 USPTO Fax Cover Sheet\_Ltr. \_ 9 20 06.doc

Mailing:

Corporate:

Manufacturing:

P.O. Box 659508

8023 Vantage Drive

4958 Stout Drive

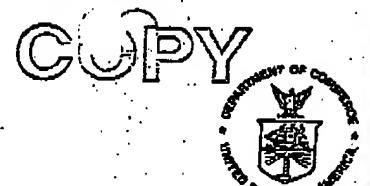
San Antonio, Texas 78265-9508 1-800-531-5369/Fax 210-255-4450 San Antonio, Texas 78230-4726 (210) 524-9000

San Antonio, Texas 78219-4334

(210) 662-0215

PTO-103X (Rev. 6-99)

FILING RECEIPT



UNITED STATIS PARTMENT OF COMMERCE Patent and Trademark Office ASSISTANT SECRETARY AND COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

| APPLICATION NUMBE | R FILING DATE | GRP ART UNIT | FIL FEE REC'D | ATTORNEY DOCKET NO | DRWCC    | [i       |        |
|-------------------|---------------|--------------|---------------|--------------------|----------|----------|--------|
| 09/458,280        | 12/10/99      | 3738         | \$760.00      | 2000.1035          | 7. DAWGS | L TOT CL | IND CL |
|                   |               | ·            |               | 2000.1033          | /        | 10       | 2      |

022775

WAYNE J COLTON INC

THE MILAM BUILDING SUITE 1108

115 EAST TRAVIS STREET

SAN ANTONIO TX 78205

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FiLING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please varify the accuracy of the data presented on this receipt. If an error is noted on this Fixing Receipt, please write to the Office of Initial Patent Examination's. Parts of Application's ("Wissing Parts Notice") In this application, please submit any corrections to this Fixing Receipt with your reply to the "Missing Parts Notice," When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Fixing Receipt Incorporating the requested

Applicant(s)

RICHARD C. VOGEL, SAN ANTONIO, TX; DAVID M. TUMEY, SAN ANTONIO, TX; SUSAN P. MORRIS, SAN ANTONIO, TX; L. TAB RANDOLPH, SAN ANTONIO, TX.

CONTINUING DATA AS CLAIMED BY APPLICANT—
THIS APPLN IS A DIV OF 08/903,026 07/30/97
PROVISIONAL APPLICATION NO. 60/053,902 07/28/97

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/24/00

THERAPEUTIC APPARATUS FOR TREATING ULCERS

PRELIMINARY CLASS: 128

RECEIVED

JAN 3 1 2000

BY:

DATA ENTRY BY: BROWN, ROSCOE

TEAM: 03 DATE: 01/24/00



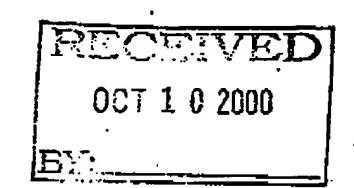
# UNITED STAL ... DEPARTMENT OF COMMERCE Patent and Trademark Office

Address: COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

| APPLICATION NO. | FILING DATE                | FIRST NAMED INVENTOR   |                                       | 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|-----------------|----------------------------|------------------------|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                 |                            | •                      | · · · · · · · · · · · · · · · · · · · | ATTORNEY DOCKET NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 09/458, 280     | 12/10/99                   | VOSEL                  | R ·                                   | 2000.1035                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 022775          |                            |                        |                                       | EXAMINER .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| WAYNE J COL     |                            | 及图:32/1004 · · · · · · | DEMIL                                 | LE.D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 115 FAST TR     | UILDING SUT<br>AVIS STREET | TE 1032                | ART UNIT                              | PAPER NUMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| SAN ANTONIO     |                            | •                      | 3764<br>DATE MAILED                   | 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| •               | •                          |                        |                                       | 10/04/00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                 |                            |                        | •                                     | The second secon |

Please find below and/or attached an Office communication concerning this application or proceeding.

Commissioner of Patents and Trademarks



|                                                                                                                                                                                                                                                                                                                                                                                                                                            | Application N               | <del></del>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Applicant(s)          |                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                            | 09/458,280                  | i                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Vogel et al.          |                     |
| Office Action Summary                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Art Unit              |                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            | Examiner                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| - The MAILING DATE of this communication appear                                                                                                                                                                                                                                                                                                                                                                                            | Danton DeMill               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 3764                  | Mrace _             |
| Period for Reply                                                                                                                                                                                                                                                                                                                                                                                                                           | ira on the cove             | il glieer mini nie co                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | respondence au        | IN 622              |
| A SHORTENED STATUTORY PERIOD FOR REPLY THE MAILING DATE OF THIS COMMUNICATION.                                                                                                                                                                                                                                                                                                                                                             | IS SET TO EX                | KPIRE <u>3</u> MONTH(                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | S) FROM               |                     |
| <ul> <li>Extensions of time may be available under the provisions of 37 C after SIX (6) MONTHS from the mailing date of this communication.</li> <li>If the period for reply specified above is less than thirty (30) days be considered timely.</li> <li>If NO period for reply is specified above, the maximum statutory prominication.</li> <li>Failure to reply within the set or extended period for reply will, by Status</li> </ul> | ation. , a reply within the | statutory minimum of and will expire SIX (6) N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | thirty (30) days will | ailing date of this |
| 1) Responsive to communication(s) filed on                                                                                                                                                                                                                                                                                                                                                                                                 | <b>~ ^</b>                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| 2a) ☐ This action is FINAL. 2b) ☒ This                                                                                                                                                                                                                                                                                                                                                                                                     | action is non-              | finai.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                     |
| 3) Since this application is in condition for allowant closed in accordance with the practice under Ex                                                                                                                                                                                                                                                                                                                                     | -                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       | ne merits is        |
| Disposition of Claims                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| 4) Claim(s) 1-10 is/are pending in the application.                                                                                                                                                                                                                                                                                                                                                                                        |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| 4a) Of the above claim(s) is/are withdrawn                                                                                                                                                                                                                                                                                                                                                                                                 | n from conside              | eration.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                       |                     |
| 5) Claim(s) is/are allowed.                                                                                                                                                                                                                                                                                                                                                                                                                |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| 6)⊠ Claim(s) <u>1-10</u> is/are rejected.                                                                                                                                                                                                                                                                                                                                                                                                  |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| 7) Claim(s) is/are objected to.                                                                                                                                                                                                                                                                                                                                                                                                            |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| 8) Claims are subject to restriction and/or el                                                                                                                                                                                                                                                                                                                                                                                             | lection require             | ment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                       |                     |
| Application Papers                                                                                                                                                                                                                                                                                                                                                                                                                         |                             | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       |                     |
| 9) The specification is objected to by the Examiner.                                                                                                                                                                                                                                                                                                                                                                                       |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| 10) The drawing(s) filed on is/are objected to b                                                                                                                                                                                                                                                                                                                                                                                           | y the Examin                | er.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                     |
| 11) The proposed drawing correction filed on is                                                                                                                                                                                                                                                                                                                                                                                            | s: a)□ appro                | ved b) disappro                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | oved.                 |                     |
| 12) The oath or declaration is objected to by the Example 12.                                                                                                                                                                                                                                                                                                                                                                              | niner.                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| Priority under 35 U.S.C. § 119                                                                                                                                                                                                                                                                                                                                                                                                             |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| 13) Acknowledgment is made of a claim for foreign pr                                                                                                                                                                                                                                                                                                                                                                                       | iority under 35             | i U.S.C. s 119(a)-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 'd).                  |                     |
| a) All b) Some * c) None of the CERTIFIED                                                                                                                                                                                                                                                                                                                                                                                                  | -                           | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       |                     |
| 1. received.                                                                                                                                                                                                                                                                                                                                                                                                                               |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| 2. received in Application No. (Series Code / S                                                                                                                                                                                                                                                                                                                                                                                            | Serial Number               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       | 1                   |
| 3. received in this National Stage application for                                                                                                                                                                                                                                                                                                                                                                                         |                             | · ——                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | CT Rule 17.2(a))      | ).                  |
| * See the attached detailed Office action for a list of the                                                                                                                                                                                                                                                                                                                                                                                |                             | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | , , ,                 |                     |
| 14) Acknowledgement is made of a claim for domestic                                                                                                                                                                                                                                                                                                                                                                                        | priority under              | 35 U.S.C. & 119(                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | e).                   |                     |
| \ttachment(s)                                                                                                                                                                                                                                                                                                                                                                                                                              |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |
| 5) Notice of References Cited (PTO-892) 6) Notice of Draftsperson's Patent Drawing Review (PTO-948) 7) Information Disclosure Statement(s) (PTO-1449) Paper No(s) 2.                                                                                                                                                                                                                                                                       | 18) 🔲<br>19) 🔲<br>20) 🔲     | Interview Summary (Interview Sum |                       | ·                   |

Art Unit: 3764

Page 2

### **DETAILED ACTION**

## Claim Rejections - 35 USC § 112

- 1. Claims 1-10 are rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.
- 2. In claim 1, it is not clear what is meant by "concurrent with the introduction of said negative pressure". How is the structure of the foot wrap further limited by this language?
- 3. It is not clear how the limitations of claims 2 and 3 further define the structure over what has already been claimed. Describing "wherein at least some part of said foot wrap overlaps at least some part of said wound dressing" is merely describing intended use. This is describing how the foot wrap is placed on the body relative to the wound dressing. This is dependent on how the device is used and doesn't appear to further define the structure. How is the structure of the foot wrap or wound dressing further limited by this language? Claim 4 also has similar language.

## Claim Rejections - 35 USC § 103

- 4. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:
  - (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.
- 5. Claims 1-5 and 10 are rejected under 35 U.S.C. 103(a) as being unpatentable over Jacobs et al. in view of Thorn et al.
- 6. Jacobs teaches a foot wrap having an inflatable bladder for applying compressive force over the lower leg and foot of a patient. Jacobs also teaches that the foot wrap can be used in

Art Unit: 3764

Page 3

combination with a wound dressing column 6, lines 4-7. Thorn teaches a conventional wound dressing for introducing negative pressure over any area of the patient. It would have been obvious to one of ordinary skill in the art to modify Jacobs to use the foot wrap in combination with a wound dressing as taught by Thorn in order to complete the teaching of Jacobs. The free and open arrangement of the Jacobs wrap allows free placement of the wound dressing anywhere desired or required.

- 7. Claims 1-10 are rejected under 35 U.S.C. 103(a) as being unpatentable over Tumey et al. in view of Thorn and Jacobs et al. Tumey teaches a foot wrap having an inflatable bladder for applying a compressive force to the patient's foot. Jacobs teaches the convention of using wound dressings in combination with inflatable foot wraps and Thorn exemplifies wound dressings that apply a negative pressure. It would have been obvious to one of ordinary skill in the art to modify Tumey to include a wound dressing with the wrap as taught by Jacobs to be able to additionally treat wounds and to use the specific type of wound dressing as taught by Thorn as an obvious example of wound dressings. Tumey additionally teaches the convention of pressure sensors 47 to control pressurization.
- 8. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure. Khouri teaches the convention of using vacuum sensors.

ddd 27 September, 2000 (703) 308-3713 Fax: (703) 305-3590

Fax: (703) 305-3590 danton.demille@uspto.gov Danton DeMille Primary Examiner Art Unit 3764



# United States Patent and Trademark Office

RECEIVED AUG 2 1 2002

COMMISSIONER FOR PATENTS

LINETED STATES PARKET AND TRADEMARK OFFICE

WASHINGTON D.C. 20231

APPLICATION NUMBER

FILINO DATE

FIRST NAMED APPLICANT

APPL DOCKET NO TITLE

09/458,280

12/10/1999

RICHARD C. VOGEL

The state of the s

CONFIRMATION NO. 8678

\*OC000000008B35558\*

30159 ATTN: LEGAL-MANUFACTURING KINETIC CONCEPTS, INC. P.O. BOX 659508 SAN ANTONIO, TX 78265-9508

Date Mailed: 08/15/2002

# NOTICE REGARDING POWER OF ATTORNEY

This is in response to the Power of Attorney filed 06/17/2002.

The Power of Attorney in this application is accepted. Correspondence in this application will be mailed to the above address as provided by 37 CFR 1.33.

SHEILA A GREEN 3700 (703) 306-0410

ATTORNEY/APPLICANT COPY



# United States Patent and Trademark Office

AUG 2 1 2002

COMMISSIONER FOR PATENTS MITED STATES PATENT AND TRADEMARK OFFICE

WASHINGTON, D.C. 20231 www.uspto.gov

APPLICATION NUMBER

FILING DATE

FIRST NAMED APPLICANT

ATTY. DOCKET NO /TITLE

09/458,280

12/10/1999

RICHARD C. VOGEL

VAC.331.

22775 WAYNE J COLTON INC THE MILAM BUILDING SUITE 1032 115 EAST TRAVIS STREET SAN ANTONIO, TX 78205

**CONFIRMATION NO. 8678** \*OC000000008635518\*

Date Mailed: 08/15/2002

# NOTICE REGARDING POWER OF ATTORNEY

This is in response to the Power of Attorney filed 06/17/2002.

• The Power of Attorney to you in this application has been revoked by the assignee who has intervened as provided by 37 CFR 3.71. Future correspondence will be mailed to the new address of record(37 CFR 1.33).

3700 (703) 306-0410

NEW ATTORNEY/AGENT COPY

|                   |                                                                                        |                         | ATTY DOCKET NO.<br>1004.1035          | 7                  | SERIAL NO.      | 910<br>2           |
|-------------------|----------------------------------------------------------------------------------------|-------------------------|---------------------------------------|--------------------|-----------------|--------------------|
| INF               | ORMATION DISCLOSUF                                                                     |                         | APPLICANT(S) Richard C. VOGRL         | et l.              |                 | 8.328G             |
|                   | (Use several sheets if nece                                                            | essary)                 | FILING DATE December 10, 1999         |                    | GROUP           | 25.5               |
| -                 | · · · · · · · · · · · · · · · · · · ·                                                  |                         | S.S. PATENT DOCUMENTS                 |                    |                 |                    |
| CAMPIER           |                                                                                        |                         | ,                                     | CLASS              | SUBCLASS        | FILING DATE        |
| THE               | DOCUMENT NUMBER                                                                        | 02/1062                 | NAME                                  | <del>-</del>       |                 | IF APPROPRIATE     |
| W _               | 3,026,874                                                                              | 03/1962                 | Stevens                               | <del>-128-</del>   | 260-            |                    |
| A                 | 4,382,441                                                                              | 05/1983                 | Svedman                               | 604                | 291             |                    |
|                   | 4,614,179                                                                              | 09/1986                 | Gamder et al.                         | 128                | 64              |                    |
| 30                | 4,969,880                                                                              | 11/1990                 | Zamierowskit                          | 604                | 305             |                    |
|                   | 5,149,331                                                                              | 09/1992                 | Ferdman et al.                        | 604                | 290             |                    |
|                   |                                                                                        |                         | ***                                   |                    |                 |                    |
|                   |                                                                                        |                         |                                       |                    |                 |                    |
|                   |                                                                                        |                         |                                       |                    |                 |                    |
|                   |                                                                                        |                         |                                       |                    |                 |                    |
|                   |                                                                                        |                         |                                       |                    |                 |                    |
|                   |                                                                                        | <u>-   </u>             |                                       |                    |                 |                    |
|                   | <u> </u>                                                                               | FORE                    | IGN PATENT DOCUMENTS                  |                    | <u></u>         | <u></u>            |
|                   | DOCUMENT NUMBER                                                                        | DATE                    | COUNTRY                               | CLASS              | SUBCLA99        | TRANSLATION YES NO |
| 70                | WO 93/09727                                                                            | 05/1993                 | , PCT                                 | A61                | 00              |                    |
|                   |                                                                                        |                         |                                       |                    |                 |                    |
|                   | •:                                                                                     |                         |                                       |                    |                 |                    |
|                   | •                                                                                      |                         | •                                     |                    |                 |                    |
|                   |                                                                                        |                         |                                       |                    |                 |                    |
|                   | AT125 BAA1117                                                                          | rre /lastudio           | g Author, Title, Date, Pertinent      | Page Fin 1         |                 |                    |
| <u>_</u>          | IIS patent app                                                                         |                         | No. 08/517,901 filed 08/22            |                    |                 | <u> </u>           |
|                   | O.O. patont app                                                                        | TORITON OCIIA           | . 110. 00/31/,701 IIIGI 00/22         | 1                  |                 |                    |
|                   | Kinetic Concep                                                                         | ts, Inc., The V         | AC - Assisting in Wound F             | lealing, 1997      | <del></del> 7.  | ···                |
| Ø                 |                                                                                        |                         |                                       |                    |                 |                    |
| MINER             | > h.A.                                                                                 | 1/0                     | DATE CONSIDERED                       | 1-16-00            |                 |                    |
| MINER: Initial if | reference considered, whether of communications of this form with next communications. | r not citation la in co | onformance with MPEP 609; Draw line t | hrough citation if | not in conforma | nce and not        |

| INFORMATION DISCLOSURE CLATION IN AN APPLICATION (Use several sheets if necessary) |                                                                               | Applicant(s) Richard C. VOGEL et al.  Pittag Date December 10, 1999  Application Number  Application Number  Group Art Unit |  |  |
|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|--|--|
| *EXAMINES INITIAL                                                                  | OTHER DOCUMENTS (Including Author                                             | r, Tùle, Date, Pertinent Pages, Etc.)                                                                                       |  |  |
|                                                                                    | U.S patent application Serial No                                              | o. 08/039,574 filed 03/25/93.                                                                                               |  |  |
| 00                                                                                 |                                                                               | •                                                                                                                           |  |  |
|                                                                                    | Kinetic Concepts, Inc., The Plex                                              | xipulse All in 1 System, date unknown.                                                                                      |  |  |
| (Q)()                                                                              |                                                                               |                                                                                                                             |  |  |
| ~~                                                                                 | · · · · · · · · · · · · · · · · · · ·                                         | f Resistant Venous Stasis Ulcers and Dermatitis with the End                                                                |  |  |
| <u>a</u>                                                                           | WWW.                                                                          | npression Boot, Aniology, The Journal of Vascular Diseases,                                                                 |  |  |
| Col                                                                                | vol. 37, pp. 47-56, 1986.                                                     | •                                                                                                                           |  |  |
|                                                                                    |                                                                               | •                                                                                                                           |  |  |
| Qu -                                                                               |                                                                               | Mechanical Venous Pump on the Circulation of the Feet in                                                                    |  |  |
|                                                                                    | Presence of Arterial Obstruction, Surgery, Gynecology & Obstetrics, vol. 146, |                                                                                                                             |  |  |
|                                                                                    | pp. 583-92, 1978.                                                             |                                                                                                                             |  |  |
|                                                                                    |                                                                               |                                                                                                                             |  |  |
|                                                                                    | Herrmann, Louis G. et al., The C                                              | Conservative Treatment of Arterioschrotic Peripheral                                                                        |  |  |
|                                                                                    | Vascular Disease, Annal S                                                     | Sugery, vVol. 100, pp. 750-60, 1934.                                                                                        |  |  |
| M                                                                                  | Landis, Eugene M. et al., The Cli                                             | inical Value of Alternate Suction and Pressure in the                                                                       |  |  |
| CON _                                                                              | Treatment of Advanced P                                                       | eripheral Vascular Disease, American Journal of Medical                                                                     |  |  |
| <u> </u>                                                                           | of the Sciences, vol. 189, p                                                  | pp. 305-25, 1935.                                                                                                           |  |  |
| - A                                                                                | Landis, Eugene M. et al., The Eff                                             | ects of Alternate Suction and Pressure on Blood Flow                                                                        |  |  |
| (3)                                                                                |                                                                               | The Journal of Clinical Investigation, vol. XII,                                                                            |  |  |
|                                                                                    | pp. 925-61, 1933.                                                             |                                                                                                                             |  |  |
| ~Ω                                                                                 | Murray, James, Influence on the E                                             | ody on Increased and Diminished Atmospheric Pressure,                                                                       |  |  |
|                                                                                    | The Lancet, pp. 909-17, 18:                                                   | 1 1                                                                                                                         |  |  |
| INER                                                                               | D. D. M. (le                                                                  | DATE CONSIDERED                                                                                                             |  |  |

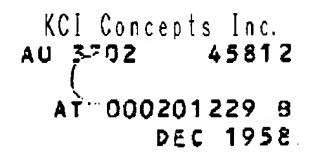
onsidered. Include copy of this form with next communication to applicant.

| INFO      | RMATION DISCLOSURE C. ATION                         | Decket Number (Option   Application Number   1004,1035   Applicant(s) |  |  |  |  |  |
|-----------|-----------------------------------------------------|-----------------------------------------------------------------------|--|--|--|--|--|
|           | IN AN APPLICATION (Use several sheets if necessary) | Richard C. VOGEL et al.  Filling Date December 10, 1999               |  |  |  |  |  |
| *EXAMPLER |                                                     | r, Title, Date, Pertinent Pagez, Etc.)                                |  |  |  |  |  |
| MITIAL    | Parrot, James C.W., The Effect                      | of a Mechanical Venous Pump on the Circulation in the                 |  |  |  |  |  |
|           | Feet in the Presence of                             | Arterial Obstruction, Master's Thesis, University of                  |  |  |  |  |  |
|           | Manitoba, Department                                | of Physiology, 1972.                                                  |  |  |  |  |  |
|           | Rastgeldi, Selahaddin, Pressure                     | Treatment of Peripheral Vascular Diseases and Intermitte              |  |  |  |  |  |
|           | Pressure Treatment of P                             | Pressure Treatment of Peripheral Vascular Diseases, pp. 1-49, 1972.   |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
|           | •                                                   |                                                                       |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
|           |                                                     | *                                                                     |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
|           | •                                                   |                                                                       |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
|           | <u>-</u>                                            |                                                                       |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
|           |                                                     | · · · · · · · · · · · · · · · · · · ·                                 |  |  |  |  |  |
|           |                                                     |                                                                       |  |  |  |  |  |
| MINER     | DIA, lle                                            | DATE CONSIDERED  - 9/2-4/ap                                           |  |  |  |  |  |

|          | Notice of References Cited |                                                                      |             |             | `,                                    |       | Applicant(s)/Patent Under<br>Reexamination<br>Vogel et al. |        | der    |
|----------|----------------------------|----------------------------------------------------------------------|-------------|-------------|---------------------------------------|-------|------------------------------------------------------------|--------|--------|
|          |                            | Notice of Refe                                                       | rences Cite | d           | Examiner                              |       | Art Unit                                                   |        |        |
| 1        |                            |                                                                      |             |             | Danton DeMille                        |       | 3764                                                       | Page   | 1 of 1 |
|          |                            |                                                                      |             | U.S. PA     | TENT DOCUMENTS                        |       | 1070-                                                      |        |        |
| *        |                            | DOCUMENT NO.                                                         | DATE        |             | NAME                                  | CLASS | SUBCLASS                                                   | SOURC  |        |
|          | +                          | <u> </u>                                                             |             |             | <u></u>                               |       |                                                            | APS    | OTHER  |
|          | l A                        | <del></del>                                                          | Feb. 1998   | Jacobs et a | al.                                   |       |                                                            |        |        |
|          | <u> 1 B</u>                | 5701917                                                              | Oct. 1997   | Khouri      |                                       |       |                                                            |        |        |
|          | ) C                        | 5443440                                                              | Aug. 1995   | Tumey et a  | l,                                    |       |                                                            |        |        |
|          | ם                          |                                                                      |             |             |                                       |       |                                                            |        |        |
|          | E                          |                                                                      |             |             |                                       |       |                                                            |        |        |
|          | F                          |                                                                      |             |             |                                       |       |                                                            |        |        |
|          | G                          |                                                                      |             |             |                                       |       |                                                            |        |        |
|          | н                          |                                                                      |             |             | • • • • • • • • • • • • • • • • • • • |       |                                                            |        |        |
|          | 1                          |                                                                      |             |             |                                       |       |                                                            |        |        |
|          | J                          | ·                                                                    |             |             |                                       |       |                                                            |        |        |
|          | K                          |                                                                      |             |             | · · · · · · · · · · · · · · · · · · · |       |                                                            | □.     |        |
|          | L                          |                                                                      |             |             |                                       |       |                                                            |        |        |
|          | М                          |                                                                      |             |             |                                       |       |                                                            |        |        |
|          |                            |                                                                      |             | FOREIGN P   | PATENT DOCUMENTS                      | S     |                                                            | DOGUME | NT     |
| *        |                            | DOCUMENT NO.                                                         | DATE        | COUNTRY     | NAME                                  | CLASS | SUBCLASS                                                   | SOURCE | OTHER  |
|          | N                          | 2195255                                                              | Apr. 1988   | GB          | Thorn et al.                          | 601   | 6                                                          |        |        |
|          | 0                          | 201229                                                               | Oct. 1958   | Austria     | Muller et al.                         | 601   | 6                                                          | 0      | 0      |
|          | P                          | 638309                                                               | May. 1928   | France      | Bernd                                 | 601   | 6                                                          |        |        |
|          | Q                          |                                                                      |             |             |                                       |       |                                                            |        |        |
| 믜        | R                          | ·•                                                                   |             |             |                                       |       |                                                            |        |        |
| 미        | s                          |                                                                      |             |             |                                       |       |                                                            | 0      |        |
|          | T                          | ·                                                                    |             |             |                                       |       |                                                            |        |        |
| Ţ        | 1                          | — <del></del>                                                        |             | NON-PATE    | NT DOCUMENTS                          |       |                                                            | DOCUME | NT     |
| *        |                            | DOCUMENT (Including Author, Title Date, Source, and Pertinent Pages) |             |             |                                       |       |                                                            |        | ••     |
| <u> </u> | U                          |                                                                      |             |             |                                       |       |                                                            |        | OTHER  |
| +        | -                          |                                                                      |             |             |                                       |       |                                                            |        |        |
|          | <b>V</b>                   |                                                                      |             |             |                                       |       |                                                            |        |        |
| י וב     | W                          | ·                                                                    |             |             |                                       |       |                                                            |        |        |
| o   :    | x                          |                                                                      |             |             |                                       |       |                                                            |        |        |

\*A copy of this reference is not being furnished with this Office action. (See Manual of Patent Examining Procedure, Section 707.05(a).)
\*\*APS encompasses any electronic search i.e. text, Image, and Commercial Databases,
U.S. Patent and Tredemark Office

PAGE 10/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14



Nr. 201229

Kl. 30 c. 8/20

1 Blant

CPT 55

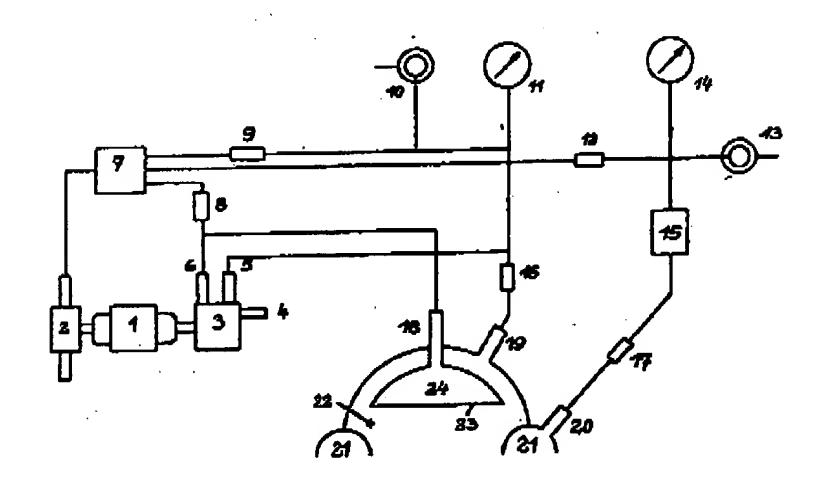
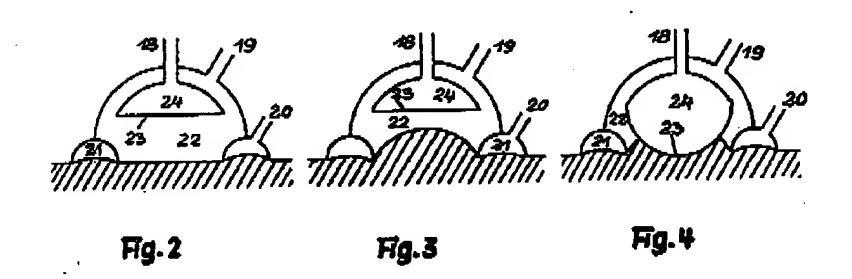


Fig.1



Kl. 30 c, 8/20



# OSTERREICHISCHES PATENTAMT

# PATENTSCHRIFT NR. 201229

Ausgegeben am 10. Dezember 1958

# OSKAR MULLER UND DR. HANS LACKNER IN WIEN

Saug- und Druckmassage-Apparat

Angemelder am 14. Juni 1957. - Beginn der Parentdauer: 15. Juni 1958.

Der Gegenstand der Erfindung bezieht sich auf einen Saug- und Druckmassage-Apparat. Es sind bereits Apparate bekannt, die im Außenbecher angeordnere Massagevorrichtungen be-\* nützen. Die deutsche Patentschrift Nr. 532080 (Stephani) benützt einen Anschlag für die Haut oder einen Vibrationsmassage-Appraat im Saugbecher Zur Erzeugung des Vakuums wird ein Staubsauger verwendet, dessen Vakuum durch 10 zwei verstellbare Löcher grob regelbar ist.

In den beiden, einander ähnlichen, britischen Patenten Nr. 14,989 A. D. 1914 (Winton-Charteris) und Nr. 369,165 (Hinder) ist ein aus Gummi oder anderem flexiblem Material 15 hergestellter Becher an einem Stiel befestigt. der im Außenbecher gleitend angeordnet ist. Der Außenbecher wird mit der einen Hand auf die Haut gedrückt, welche dadurch gespannt wird, die zweite Hand bearbeitet mit dem 20 Innenbecher, das durch den Außenbecher gehaltene Stückehen Haut, wobei Saug- und Druckwirkungen zustande kommen.

Der Vorteil, den der Erfindungsgegensrand gegenüber den angeführten Patenten bietet, be-25 steht darin, daß er die Wirkung einer Saugmassage und die nachfolgend zu ersetzende Handmasssage in einem Arbeitsgang und mittels einer automatisch arbeitenden Vorrichtung vereint.

Fig. 1 zeigt die schematische Schaltung eines Massagegerätes. Ein Elektromotor 1 treibt eine Vakuumpumpe 2, welche einen Windkessel 7 evakuiert. Cher eine Düse 9 mit zirka 0,4 mm2 und ein Filter 16 wird der Raum 22 durch den 35 Schlauchanschluß 19 am Saugbecher evakuiett. Das Vakuum in dieser Leitung ist durch das Reduzierventil 10 regelbar und das Vakumeter 11 kontrollierbar, Die gleiche Leitung kann über die Steuereinrichtung 3 und deren An-

00 schluß 5 über die durchhohrte Achse 4 mit der Außenfuft in Verbindung gebracht und damit eine Vakuumverminderung im Raum 22 herbeigeführt werden (Fig. 2).

Aus dem Windkessel 7 führt eine zweite Leias song liber eine Diese 12 von 0,1 einen zweiten Windkessel 15 dessen Vakuum durch die Reduzierventil 14 regelbar und das Vakumeter 14 meßbar ist. Der Windkessel 15 ist über

das Filter 17 und den Schlauchanschluß 20 mit dem Saugrand 21 des Massagebeehers in Ver- 50 bindung.

Eine dritte Leitung aus dem Windkessel 7 führt über die Düse 8 mit einem Durchmesser con 0,1 mm2 in den Druckbecher 24. Diese Leirung ist über den Anschloß 6 der Steuereinrich- 15 rung und deren durchbohrte Achse a mit dem normalen Luftdruck verbunden.

Die Massagevorrichtung selbst besteht sehematisch (Fig. 1) aus einem Außenbecher mit dem Saugraum 22 und einem Schlauchan- 103 schluß 19. Der Rand des Bechers ist als Hohlrand 21 ausgebilder mit einem Schlauchanschluß 20. Im Außenbecher ist ein Innenbecher 24 befestigt, dessen hautseitige Offnung mit einer Membrane 23 luftdicht verschlossen ist. 45

Zur Funktion des Gerätes wird der Massagebecher, wie in Fig. 2 gezeigt, auf die Haut aufgesetzt. Der Hohlrand 21 saugt sich fest. Dann wird auch der größere Raum 22 evakuiert und die Haur wird, wie in Fig. 3, in den Raum 22 7 hineingezogen. Nun wird durch die Steuervorrichtung 3 der Raum 24 mit der Außenluft verbunden. Dadurch laster auf der Membrane 23 ein Gasdruck, der gleich der Differenz ist, zwischen dem am Vakumeter 11 abzulesenden Vakuum und dem am Behandlungsort herrschenden Lustdruck, weniger der Retraktionskraft der Membrane. Aus diesem Grund muß die Membrane aus dünnem, hochelastischem Material sein. Sie wird, wie in Fig. 4 gezeigt. durch die Druckdifferenz gegen die Haut gedrückt. Zur regelmäßigen Wiederholung dieser Sange und Druckvorgänge dient die Steuervorrichtung 3.

## PATENTANSPRUCHE:

1. Sauge und Druckmassage-Apparat mit einem im Innern des Saugbechers (22) angeordneten Druckbecher (24), dadurch gekennzeich net, daß die hautseitge Öffnung des Druck hechers durch eine luftdicht schließende, elasti sche Membrane (23) abgeschlossen ist.

2. Massageapparat nach Anspruch 1. dadurel gekennzeichner, daß der Rand des Saugbecher 31s Hohlraud (21) ausgebilder ist, der heim Auf

# UK Patent Application (19) GB (17) 2 195 255 (13) A

(43) Application published 7 Apr 1988

- (21) Application No 8623412
- (22) Date of filing 30 Sep 1986
- (71) Applicant

Vacutoc UK Limited

(Incorporated in United Kingdom)

St. Andrew's House, 31 Greek Street, Stockport

- (72) Inventors Ole Thorn Flemming Danhild Feld Jimmy Paisnow David Hallam
- (74) Agent and/or Address for Service McNeight & Lawrence. Regent House, Heaton Lane, Stockport SK4 18S

- (51) INT CL\* A61H 7/00 9/00
- (52) Domestic classification (Edition J): A5R EQ
- (56) Documents cited

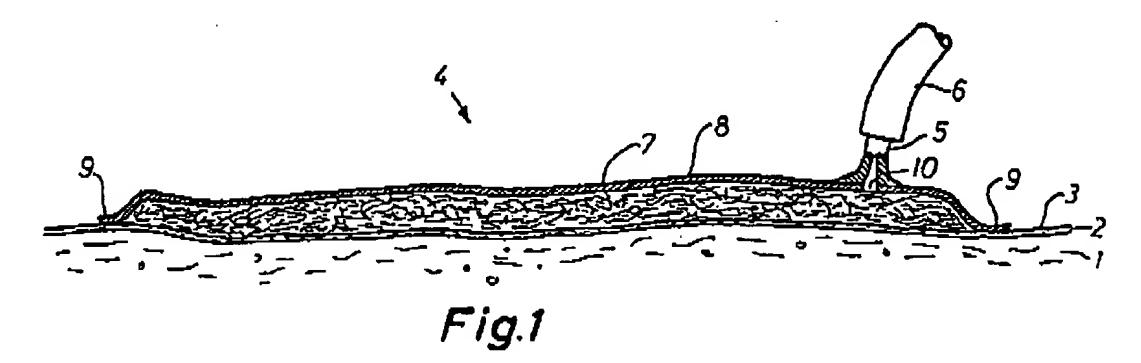
GB A 2149855 G8 1110824 GB 0379824

(58) Fleid of search

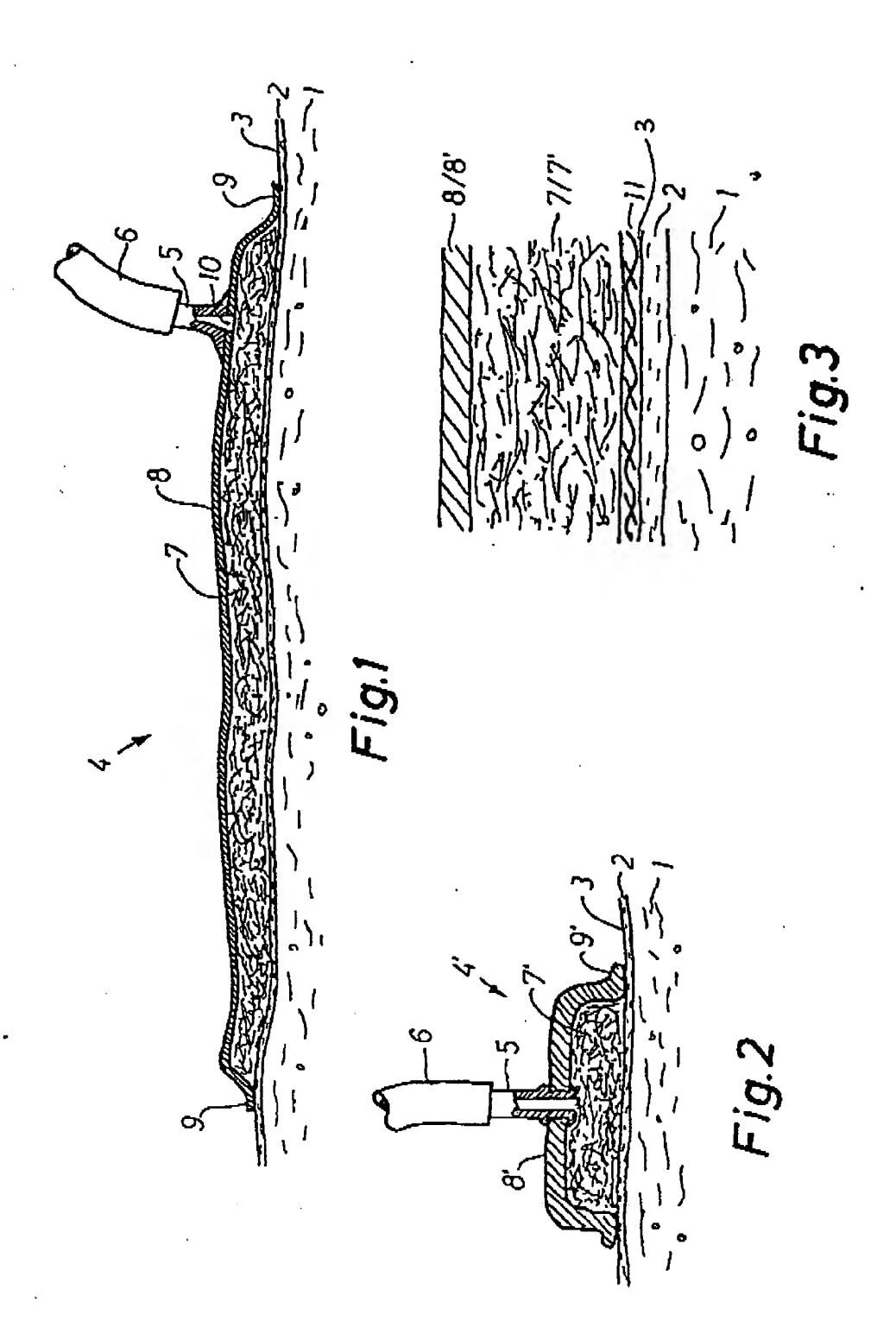
Selected US specifications from IPC sub-class A51 H

### (54) Wethod and apparatus for vacuum treatment of an epidermal surface

(57) When treating an epidermal surface (surface of the skin) (3) with subatmospheric pressure supplied from a source (not shown) through a flexible tube (6), an applicator (4) is used consisting of a first, porous layer (7) of e.g. felt and a second, airtight layer (8) of e.g. plastic sheet material, the edge portions (9) of which extend beyond the first layer (7) and form a seal against the epidermal surface (3).



30 SEP.85- 23412 // DFA 2195255



#### SPECIFICATION

Method and apparatus for vacuum treatment of an epidermal surface

The present invention relates to a method of applying subatmospheric pressure or partial vacuum to an epidermal surfaçe.

Previously known methods of this kind usu-10 ally involve placing the limb or other part of the body whose epidermal surface is to be treated with subatmospheric pressure, in a closed airtight chamber which is then evacuated, for example, by using a vacuum pump.

- 15 To prevent the walls of the chamber from collapsing under the influence of atmospheric pressure, they must have considerable strength, especially in consideration of the subatmospheric pressure possibly being as low
- 20 as 0.55 har, corresponding to an external positive pressure on the chamber of almost half an atmosphere. Since the limb or part of the body in question is necessarily connected at one end to the body of the person in ques-
- 25 tion, special measures must be taken to form an air-tight seal between that end of the vacuum chamber, through which the part of the body has been introduced, and that part itself. In cases where the subatmospheric pressure
- 30 is to be applied to a large part of the body of the person in question, such as the part comprising the thorax and the abdominal cavity, the application of subatmospheric pressure to the outside of this part of the body may
- 35 cause internal organs containing air or gases to be distended, and breathing may be disturbed.

Another disadvantage with the known methods is that the space within the vacuum 40 chambers around the part of the body or limb may need to be of rather large volume, for which reason it may take a long time to evacuate them.

It is an object of the present invention to 45 provide a method of the kind referred to free of the disadvantages mentioned above and being suitable for implementation by personnel without great technical ability with regard to operating apparatus.

According to the present invention there is provided a method of applying subatmospheric pressure to an epidermal surface, said method being of the kind comprising the formation of an airtight space outside said surface, said 55 space being connected to a source of subatmospheric pressure activated to lower the

pressure in said space, characterised in that said airtight space is formed by

(a) placing on and/or along said epidermal 60 surface a first layer consisting of a porous and preferably flexible material of a kind comprising mutually communicating pores not losing the mutual communication when the material is subjected to compressive forces, and

and preferably also on the part of the epidermal surface closest thereto and not covered by said first layer, a second layer consisting of airtight and preferably flexible material.

Such a method is extremely easy to carry out, and provides partly the advantage that the force on the epidermal surface caused by the subatmospheric pressure is counterbalanced by the mechanical force produced by 75 the same subatmospheric pressure acting on the second layer and hence on the epidermal surface. This force does, however, act on the epidermal surface solely on the relatively limited contact areas between the pores in the

80 first layer, so that the epidermal surface facing the pores is fully influenced by the subatmospheric pressure. Experience has shown that the effect on the cutis and possibly underlying tissue is not inferior to the effect obtainable 85 by using the previously known methods men-

tioned above. The present invention also relates to an applicator for use in carrying out the method of the invention.

The invention will be further apparent from 90 the following description with reference to the accompanying drawing in which:

Figure 1 is a sectional view showing a region of skin with an applicator according to a 95 first embodiment placed thereon;

Figure 2 is a sectional view similar to Figure 1 through a skin region with an applicator according to a second embodiment; and

Figure 3 shows the use of a protective layer 100 between the skin and the applicator on an enlarged scale.

The drawings shows diagrammatically a skinregion consisting if subcutis 1 and epidermis the latter having an external epidermal sur-105 face 3.

With the purpose of applying subatmospheric pressure to a part of the epidermal surface 3, there is on that surface placed a vacuum applicator 4, being connected to a 110 source (not shown) of reduced pressure. which may be of a previously known type, through a tube-connecting stub 5 and a flexible tube 6.

In the embodiment shown in Figure 1, the 115 vacuum applicator comprises a first layer 7, lying in contact with a part of the epidermal surface 3. The first layer 7 consists of porous material, the pores of which are interconnected and do not close upon application of a 120 compressive force to the material. Such a material may for example be felt, which—as is well known—consists of mutually entangled fibres of wool or other natural or synthetic fibre. The vacuum applicator 4 further com-125 prises a second layer 8, placed on top of (outside of) the first layer 7 and being so much larger than the latter in the extent of its area, that it is also in direct contact with the Anidermal surface 3 with an edne portion 9

PAGE 15/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

example, be constituted by a thin sheet of plastics or rubber. To make it possible to adapt the shape of the vacuum applicator 4 to the shape of the limb or body part in ques-5 tion, both the first layer 7 and the second layer 8 should be flexible, and this condition is fulfilled by using the materials mentioned.

In the second layer 8 there is formed a hole 10, and the tube-connecting stub 5 is secured 10 to the second layer 8 in such a manner, such as by means of glue or cement, that the opening in the stub 5 communicates with the hole 10.

When the source (not shown) of subatmos-15 pheric pressure is connected to the flexible tube 6 the space between the epidermal surface 3 and the inside of the second layer 8 is evacuated through the stub 5 and the hole 10. If the first layer 7 were not present in this

- 20 space, then the space would collapse immediately at the onset of the evacuation, and the second layer 8 would contact the epidermal surface in a fluid-tight manner, so that the subatmospheric pressure in the flexible tube 6
- 25 would be unable to reach the region of the epidermal surface covered by the vacuum applicator 4. The porous first layer 7 does, however, in a purely mechanical manner keep the second layer 8 spaced from the epidermal sur-
- 30 face 3, for which reason the subatmospheric pressure between the fibres in the first layer 7 can propagate through the entire space between the epidermal surface 3 and the second layer 8, so that the part of the epidermal sur-
- 35 face underlying the first layer 7 will in its entirety be subjected to subatmospheric pressure. At the same time, the epidermal surface 3 will be subjected to a mechanical force acting thereupon from the most adjacent fibres in
- 40 the first layer 7, but since these fibers will only be in contact with a limited portion of the area of the epidermal surface 3, the major part of this surface will be subjected to the subatmospheric pressure.
- Apart from the weight of the vacuum applicator 4, no net mechanical force is applied to the limb or body part comprising the epidermal surface 3, because the surface 3 is partly acted upon by an upwardly las seen in Figure 50 1) directed force corresponding to the magni
  - tude of the subatmospheric pressure multiplied by the area in question, while the epidermal surface 3 at the same time is acted upon by a downwardly directed force transmitted through
- 55 the first layer 7, said downwardly directed force being caused by the effect of the very same subatmospheric pressure acting on the inside of the second layer 8, the area of
- which is substantially the same as the area of 60 the epidermal surface 3 being acted upon. In spite of the apparently paradoxical situation involving the epidermal surface 3 simultaneously being acted upon by two equal and oppositely directed forces, the subatmospheric pressure

below or behind the epidermal surface 3, since the subatmospheric pressure has access to the tissue through a rather large percentage of the surface, only the remaining part of the 70 surface being acted upon by the mechanical force as directed downwards in Figure 1. Thus, practice has shown that by using a vacour applicator constructed according to the principles illustrated in Figure 1 and explained 75 in the foregoing, it is possible to obtain an effect on the cutis 1 2 and possibly the underlying tissue at least as effective as that

obtainable using previously known apparatus for subjecting epidermal surfaces to subatmos-80 pheric pressures.

105 surface 3.

The first and second layers 7 and 8 respectively shown in Figure 1 may be extended in all directions and shaped in such a manner, that they for example form a bag-like or 85 sleave-like structure, that may be placed around a greater or smaller part of the body in question. In certain instances, however, it may be desirable to apply subatmospheric pressure to a very limited region of the epi-90 dermal surface, and in such cases it is possible to employ a vacuum applicator 4' as shown diagrammatically in Figure 2. Like the vacuum applicator 4 shown in Figure 1, the vacuum applicator 4' shown in Figure 2 also 95 consists of a first layer 7' and a second layer 8'. Of these, the first layer 7' may-apart from the size—be identical to the first layer 7 shown in Figure 1, while the second layer 8' as shown in Figure 2 may be constituted by a 100 vacuum cup, with which the tube-connecting stub 5 and with it the flexible tube 6 are connected in a known manner. The edge portion 9' of the vacuum cup 8' provides the requisite sealing effect against the epidermal

In order to avoid the first layer 7 or 7' becoming dirty and to prevent the transmission of infectious matter from one person to another, it is possible as shown in Figure 3 to 110 place a protective layer 11 between the epidermal surface 3 and the first layer 7 or 7'. The protective layer 11 should---of course—be made of a material capable of both transmitting the subatmospheric pressure and 115 the mechanical force from the first layer 7 or 7', and to this end the protective layer 11 can suitably consist of a textile material, such as sheeting or the like, that may be disposable or

laundered and/or sterilized. The subatmospheric pressure being 120 transmitted to the epidermal surface 3 by means of the vacuum applicator 4 or 4' may be of the order of magnitude 0.05 to 0.55 ... bar. The source of subatmospheric pressure

125 (not shown) connected to the flexible tube 6 may be provided with means to adjust the subatmospheric pressure, possibly also means to vary this pressure in a preprogrammed manner, so that the subatmospheric pressure

PAGE 16/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

3

10

ing the desired effect on the epidermal region in question, possibly also the underlying tissue.

It will be appreciated that it is not intended to limit the invention to the above example only, many variations, such as might readily occur to one skilled in the art, being possible, without departing from the scope thereof as defined by the appended claims.

#### CLAIMS

1. a method of applying subatmospheric pressure to an epidermal surface, said method being of the kind comprising the formation of an airtight space outside said surface, said space being connected to a source of subatmospheric pressure activated to lower the pressure in said space, characterised in that said airtight space is formed by

(a) placing on and/or along said epidermal surface a first layer consisting of a porous and preferably flexible material of a kind comprising mutually communicating pores not losing the mutual communication when the material
 25 is subjected to compressive forces, and

(b) placing on the outside of said first layer and preferably also on the part of the epidermal surface closest thereto and not covered by said first layer, a second layer consisting 30 of airtight and preferably flexible material.

2. A method according to claim 1, characterised by using as the first layer a layer of fibrous material.

3. A method according to claim 1 and claim35 2 wherein said first layer is of felt.

4. A method according to claim 1, 2 or 3 characterised by using as the second layer a flexible sheet or foil.

5. A method according to claim 1 and claim 40 4 wherein said second layer is of plastics.

6. A method according to claim 1, 2 or 3 characterised by using as the second layer a vacuum cup, the internal space of which has substantially the same height as said first

45 layer, and the peripheral edge of which is in contact with the epidermal surface around the first layer.

7. A method according to any one or any of the claims 1-6, characterised in that a protective layer of air-permeable material is placed on the epidermal surface prior to the first layer being placed thereon.

8. A method according to claim 7 wherein said protective layer is a textile material.

 9. An applicator for carrying out the method according to any one or any of the claims 1-8, characterised by

(a) a first layer consisting of porous and preferably flexible material of the kind with 60 mutually communicating pores not losing the mutual communication when the material is subjected to compressive forces, and

(b) a second layer adapted to be placed on the outside of the first layer and consisting of 65 airtight and preferably flexible material, said second layer having a greater extent in area than said first layer and comprising means for connecting the space below or behind said second layer with a source of subatmospheric 70 pressure.

10. An applicator according to claim 9, characterised in that said first layer consists of fibrous material.

11. An applicator according to claim 1075 wherein said first layer is of felt.

12. An applicator according to claim 9, 10 or 11 characterised in that said second layer consists of flexible sheet material

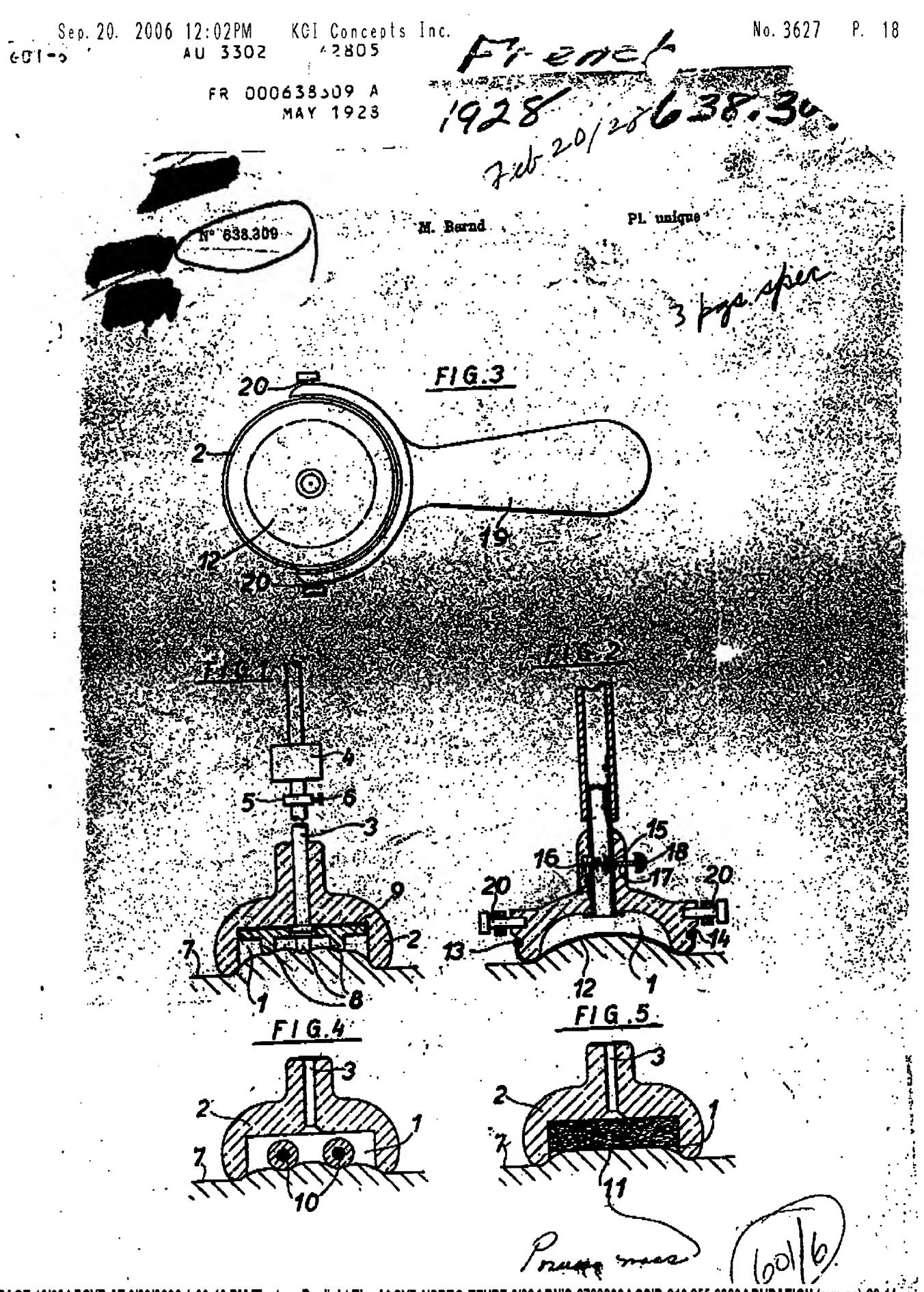
13. An applicator according to claim 12 80 wherein said second layer is of plastics.

14. An applicator according to claim 9, 10 or 11 characterised in that said second layer consists of a vacuum cup, the internal space of which has substantially the same height as the first layer and the peripheral edge of which is adapted to be in contact with the epidermal surface around said first layer.

15. An applicator according to any one or any of the claims 9-14 characterised by a protective layer of air permeable material adapted to be placed between the epidermal surface and the first layer.

16. An applicator according to claim 15 wherein said protective layer is a textile masserial.

Published 1988 at The Patent Office, State House, 68/71 High Holborn, London WC1R 4TP Further copies may be obtained from The Patent Office, Sales Branch, St Mary Cray, Orpington, Kent BR5 3RD Printed by Burgess & Son (Abingdon) Ltd. Con 1/97



PAGE 18/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

[638.309]

\_ 9 \_

Les figures 2 et 3 montrent, respectivement, en élévation, avec coupe partielle, et en plan, une autre forme d'exécution du bol d'aspiration et de sa liaison avec la poignée.

Les figures 4 et 5 montrent, en coupe médiane verticale, deux autres formes d'exétition du bol d'aspiration.

Ainsi que le montre la forme d'exécution d'après la figure 1, l'organe de massage 2, i o constitué comme un bol d'aspiration, et comprenant la chambre creuse i en forme de cloche, est relié, au moyen de la canalisation d'aspiration 3, à une pompe d'aspiration 4 d'un type quelconque. Une soupape 15 de réduction 5 est disposée entre la pompe et l'organe de massage, la vis 6 permettant de régler cette soupape au degré de dépression voulu. La soupape de réduction peut aussi être sixée sur l'organe de massage suiso même, ou sur la pompe. De même, en supprimant la canalisation de liaison, la pompe peut être réunie avec l'organe de massage. ¿ Si la pompe. 4 est mise en action, et que la soupapé de réduction 5 soit convenablement haregies, une depression permanente est prodinte dans la chambie crouse ande l'organe. de massage of de telle corte que amai que e le montre la figuré, y , la surface de la peau ? de la partie du corps qui subit le massage 30 pénètre quelque peu à l'intérieur de la Sanchembre creuse. Si, alors, l'organe de massage est déplacé à la main sur le corps, la pompe d'aspiration 4, qui travaille continuellement, maintient constamment la dépression

35 au degré voulu. Afin d'éviter une pénétration trop sorte de la peau à l'intérieur du bol, on peut, conformément à l'invention, disposer, à l'intérieur du bol d'aspiration 2, des dispositifs Lo qui permettent de soutenir la peau. D'après la figure 1, on a prévu, dans ce but, plusieurs saillies 8 qui peuvent être disposées sur une plaque 9, laquelle peut être placée dans le bol d'aspiration 2. On peut aussi utiliser 45 des galets 10, qui peuvent tourner sur leurs axes (fig. 4) et qui agissent également pour renforcer l'action de massage; on peut aussi employer une masse poreuse 11 (fig. 5), par exemple en caoutchouc. D'ailleurs, dans le 50 même but, on peut disposer, dans la surface d'aspiration, des trous, ou bien des barreaux transversaux qui servent de supports. La

surface d'aspiration peut aussi être établie en sorme de grille, et il est clair que le support de la peau peut aussi être obtenu par 55 tous autres dispositifs de supports appropriés. L'organe de massage peut aussi être constitué sous forme de plusieurs bols d'aspiration, sixés les uns aux autres de toute manière appropriée.

Les figures a et 3 montrent une autre forme d'exécution dans làquelle la chambre creuse de l'organe de massage a est recouverte par une membrane in se composant d'une matière flexible, cette membrane étant 65 maintenue à l'état de tension par un jonc d'arrêt 13 pénétrant dans une gorge 14 de l'organe de massage. Le recouvrement constitué par la membrane 12 a pour objét d'empêcher que des onguents, crêmes, 70 pomades, etc., qui peuvent être employés en vue du massage, ne puisse parvenir dans la capalisation d'aspiration. Lorsque, sous l'action de l'aspiration, la membrane 12 a complètement pénétre dans la chambre 13, et 75 recouvre par conséquent le débouché de la canalisation d'aspiration à que celle membrane obture la dite membrade doit être ramenes dans sa position initiale. A cet effet, on milise un organe, de fermeture, par ex- 800. emple une soupape conique à 5, laquelle est pressée sur son siège par le ressort 16; le siège de la soupape 15 termine un conduit 17 qui relie la canalisation d'aspiration avec l'air extérieur. Par le bouton 18, la 85 soupape 15 peut être ouverte, de telle sorté que l'action d'aspiration est interrompué, et que la membrane 12 est ramenée dans la position initiale. La disposition de l'organe de fermeture 15 et du canal 17 débouchant go à l'extérieur peut aussi être employée dans des appareils de massage sans membrane, et, dans ce cas, sert à équilibrer la différence de pressions par liaison avec l'air extérieur, de manière à interrompre immédiatement l'ac- 95 tion de massage. La soupape de réduction 6 peut ne former qu'un seul et même organe avec le système de fermeture 15.

Dans la forme d'exécution représentée par les figures 2 et 3, le bol d'aspiration de 100 l'organe de massage 2 est entouré par une poignée 19 établie en forme d'étrier, cette poignée pouvant tourner sur des axes 20. de telle sorte que, sans que la canalisation

PAGE 20/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

vonte des Lucicules, s'adresser à l'Inpaturata figurature, 27, rue de la Convention, Paris (15).



# UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS UNITED STATES PATENT AND TRADEMARK OFFICE WASHINGTON, D.C. 20231

RECEIVED AUG 1 2 2002

Paper No. 10

Eric W. Cernyar Kinetic Concepts, Inc. PO Box 659508

San Antonio, TX 78265-9508

In re Application of Richard Vogel Application No. 09/458,280 Filed: December 10, 1999 Attorney Docket No. VAC.331.1 **COPY MAILED** 

AUG 0 6 2002

OFFICE OF PETITIONS

ON PETITION

This is a decision on the petition under 37 CFR 1.137(b), filed June 17, 2002, to revive the aboveidentified application.

The petition is GRANTED.

The above-identified application became abandoned for failure to respond in a timely manner to the non-final Office action mailed October 4, 2000, which set a shortened statutory period of three months. Accordingly, the application became abandoned on January 5, 2001.

The application file is being forwarded to Technology Center AU 3764 for further processing.

Telephone inquiries concerning this matter may be directed to the undersigned at (703) 308-6911.

Latrice Bond

Paralegal Specialist

Office of Petitions

Office of the Deputy Commissioner

for Patent Examination Policy

DOCKET DATE: 2-6-DOCKET FOR:

DOCKET BY:



# UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20201

|                                                                   |                     |                      | ************************************** |                  |  |
|-------------------------------------------------------------------|---------------------|----------------------|----------------------------------------|------------------|--|
| APPLICATION NO.                                                   | FILING DATE         | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO.                    | CONFIRMATION NO. |  |
| 09/458,280                                                        | 12/10/1999          | RICHARD C. VOGEL     | VAC.331.                               | 8678             |  |
| 30159                                                             | 7590 10/21/2002     | •                    | •                                      |                  |  |
|                                                                   | GAL-MANUFACTURING   | RECTIFED             | EXAM                                   | NER              |  |
| KINETIC CONCEPTS, INC. P.O. BOX 659508 SAN ANTONIO, TX 78265-9508 |                     | OCT 2 8 2002         | DEMILLE, DANTON D                      |                  |  |
| D. D. FILL C.                                                     | 1410, IX 76203-3306 |                      | ART UNIT                               | PAPER NUMBER     |  |
|                                                                   |                     | BY:                  | 3764                                   |                  |  |
|                                                                   |                     |                      | DATE MAILED: 10/21/2002                |                  |  |

Please find below and/or attached an Office communication concerning this application or proceeding.

VAC.331A.US

DOCKET DATE: 12-21-02

DOCKET FOR

DOCKET BY:

O-H This

PTO-90C (Rev. 07-01)

| •                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                           | Application No.                                                                                                                                                                    | Applicant(s)                                                                                                                             |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|--|
| 0.6                                                                                                                                                                                                                                                            | ion Antion Comment                                                                                                                                                                                                                                                                                                                                                                                                        | 09/458,280                                                                                                                                                                         | VOGEL ET AL.                                                                                                                             |  |
|                                                                                                                                                                                                                                                                | ice Action Summary                                                                                                                                                                                                                                                                                                                                                                                                        | Examiner                                                                                                                                                                           | Art Unit                                                                                                                                 |  |
|                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                           | Danton DeMille                                                                                                                                                                     | 3764                                                                                                                                     |  |
| - The N<br>Period for Reply                                                                                                                                                                                                                                    | AILING DATE of this communication                                                                                                                                                                                                                                                                                                                                                                                         | appears on the cover sheet wit                                                                                                                                                     | th the correspondence address —                                                                                                          |  |
| THE MAILING - Extensions of the parter SIX (6) MC - If the period for - If NO period for - Failure to reply received.                                                                                                                                          | ED STATUTORY PERIOD FOR RESIDENTE OF THIS COMMUNICATION may be available under the provisions of 37 CFR NTHS from the mailing date of this communication, reply specified above is less than thirty (30) days, a reply is specified above, the maximum statutory per within the set or extended period for reply will, by stated by the Office later than three months after the maximum adjustment. See 37 CFR 1.704(b). | N. R 1.138(a). In no event, however, may a re- reply within the statutory minimum of thirty fod will apply and will expire SIX (6) MONT atute, cause the application to become ARA | eply be timely filed  (30) days will be considered timely.  THS from the mailing date of this communication.  ANDONED (35.1) S.C. 6.133) |  |
| 1) Respo                                                                                                                                                                                                                                                       | nsive to communication(s) filed on 1                                                                                                                                                                                                                                                                                                                                                                                      | 7 June 2002                                                                                                                                                                        |                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                           | This action is non-final.                                                                                                                                                          |                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                | , <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                    |                                                                                                                                          |  |
| 3) Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under Ex parte Quayle, 1935 C.D. 11, 453 O.G. 213.  Disposition of Claims                            |                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                    |                                                                                                                                          |  |
| 4) Claim(s                                                                                                                                                                                                                                                     | ) <u>1-17</u> is/are pending in the applicat                                                                                                                                                                                                                                                                                                                                                                              | ion.                                                                                                                                                                               |                                                                                                                                          |  |
| 4a) Of the above claim(s) is/are withdrawn from consideration.                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                    |                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                | ) is/are allowed.                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                    |                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                | 1-17 is/are rejected.                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                    | ·                                                                                                                                        |  |
|                                                                                                                                                                                                                                                                | is/are objected to.                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                | are subject to restriction and                                                                                                                                                                                                                                                                                                                                                                                            | l/or election requirement.                                                                                                                                                         |                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                | eification is objected to by the Exami                                                                                                                                                                                                                                                                                                                                                                                    | ne <i>r</i>                                                                                                                                                                        |                                                                                                                                          |  |
| ( ) <u> </u>                                                                                                                                                                                                                                                   | ring(s) filed on is/are: a)☐ ac                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                    | a Evaminar                                                                                                                               |  |
|                                                                                                                                                                                                                                                                | nt may not request that any objection to                                                                                                                                                                                                                                                                                                                                                                                  | ·                                                                                                                                                                                  | ·                                                                                                                                        |  |
|                                                                                                                                                                                                                                                                | osed drawing correction filed on                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                    |                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                | ved, corrected drawings are required in                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                    | sapproved by the examiner.                                                                                                               |  |
|                                                                                                                                                                                                                                                                | or declaration is objected to by the E                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                    |                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                | U.Ş.C, §§ 119 and 120                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                    |                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                | edgment is made of a claim for foreign                                                                                                                                                                                                                                                                                                                                                                                    | On priority under 35 U.S.C. \$ :                                                                                                                                                   | 440(a) (d) as (6)                                                                                                                        |  |
|                                                                                                                                                                                                                                                                | Some * c) None of:                                                                                                                                                                                                                                                                                                                                                                                                        | gir priority under ab 0.3.0. 9                                                                                                                                                     | 113(a)-(c) or (i).                                                                                                                       |  |
|                                                                                                                                                                                                                                                                | ertified copies of the priority docume                                                                                                                                                                                                                                                                                                                                                                                    | nts have been somived                                                                                                                                                              | -                                                                                                                                        |  |
|                                                                                                                                                                                                                                                                | •                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                    | -lia-diam Bl-                                                                                                                            |  |
|                                                                                                                                                                                                                                                                | ertified copies of the priority documer                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                    |                                                                                                                                          |  |
| 3. Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)). * See the attached detailed Office action for a list of the certified copies not received. |                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                    |                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                    | 119(e) (to a provisional application).                                                                                                   |  |
| _a) 🔲 The i                                                                                                                                                                                                                                                    | ranslation of the foreign language pringing language pringing language of a claim for domes                                                                                                                                                                                                                                                                                                                               | rovisional application has bee                                                                                                                                                     | n received.                                                                                                                              |  |
| Attachment(s)                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                    |                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                | ces Cited (PTO-892)<br>erson's Patent Drawing Revlew (PTO-948)<br>esure Statement(s) (PTO-1449) Paper No(s)                                                                                                                                                                                                                                                                                                               | 5) Notice of Info                                                                                                                                                                  | mmary (PTO-413) Paper No(s) ormal Patent Application (PTO-152)                                                                           |  |
| S. Patent and Trademark Office                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                           | ·                                                                                                                                                                                  |                                                                                                                                          |  |

Art Unit: 3764

Page 2

# **DETAILED ACTION**

# Claim Rejections - 35 USC § 103

- 1. Claims 1-5, 10-13, 17 are rejected under 35 U.S.C. 103(a) as being unpatentable over Jacobs et al. in view of Thorn et al.
- 2. Jacobs teaches a foot wrap having an inflatable bladder for applying compressive force over the lower leg and foot of a patient. Jacobs also teaches that the foot wrap can be used in combination with a wound dressing column 6, lines 4-7. Clearly the inflatable bladder of Jacobs is capable of overlapping at least a portion of the wound dressing since it is taught that the releasable securing means allows the patient to take the device off to access the wound dressing. Thorn teaches a conventional wound dressing for introducing negative pressure over any area of the patient. It would have been obvious to one of ordinary skill in the art to modify Jacobs to use the foot wrap in combination with a wound dressing as taught by Thorn in order to complete the teaching of Jacobs. The free and open arrangement of the Jacobs wrap allows free placement of the wound dressing anywhere desired or required. Regarding claim 13, Thorn teaches a layer 7 of porous material. The porous material can be of any well known design as long as it maintains the space between the skin and the second layer 8. Open celled clastic foam is just such a conventional material and an obvious provision.
- 3. Claims 1-17 are rejected under 35 U.S.C. 103(a) as being unpatentable over Tumey et al. in view of Thorn and Jacobs et al. Tumey teaches a foot wrap having an inflatable bladder for applying a compressive force to the patient's foot. Jacobs teaches the convention of using wound dressings in combination with inflatable foot wraps and Thorn exemplifies wound dressings that apply a negative pressure. It would have been obvious to one of ordinary skill in

No. 3627 P. 27

Application/Control Number: 09/458,280

Art Unit: 3764

Page 3

the art to modify Tumey to include a wound dressing with the wrap as taught by Jacobs to be able to additionally treat wounds and to use the specific type of wound dressing as taught by Thorn as an obvious example of wound dressings. Tumey additionally teaches the convention of pressure sensors 47 to control pressurization. Tumey teaches the pressure source is intermittently operable. Thorn teaches the vacuum source can be operable to vary the negative pressure in a preprogrammed manor to provide the desired effect. The art teaches intermittent pressure application therefore providing intermittent negative pressure would have been obvious to provide the desired therapeutic effect.

## Response to Arguments

- 4. Applicant's arguments filed 17 June 2002 have been fully considered but they are not persuasive.
- 5. While Jacobs teaches an inflatable bladder to normalize the forces applied, there is no claim language to define over this. It may be true that Jacobs teaches a single inflation bladder to evenly distribute the pressure applied to the limb, the claims do not exclude this added feature of Jacobs. It remains a fact that Jacobs teaches that wound dressings can be used in combination with their device. While the wound dressing of Thorn may teach a type of wound dressing that very few are in use, it is still one type of wound dressing that is well known and could be used. The inflatable bladder may apply pressure to the wound dressing however, the purpose of the porous layer 7 is to maintain the outer layer 8 in spaced relation to maintain the vacuum pressure above the wound. One would not be destroying either teaching. One is just taking the suggestion of Jacobs to use a wound dressing with the inflatable bladder and using the wound dressing of Thorn to complete the apparatus,

Art Unit: 3764

Page 4

## Conclusion

- 6. THIS ACTION IS MADE FINAL. Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).
- 7. A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the mailing date of this final action.

ddd 17 October, 2002 (703) 308-3713 Fax: (703) 305-3590

danton.demille@uspto.gov

Danton DeMille
Primary Examiner
Art Unit 3764





# UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE United States Potent and Trademork Office Address COMMESIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20281

| UPPLICATION NO.                           | FILING DATE      | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO.     | CONFIRMATION N |  |
|-------------------------------------------|------------------|----------------------|-------------------------|----------------|--|
| 09/458,280                                | 12/10/1999       | RICHARD C. VOGEL     | VAC.331.1               | 8678           |  |
| 30159 7                                   | 590 03/03/2003   |                      |                         |                |  |
|                                           | AL-MANUFACTURING |                      | EXAMI                   | NER            |  |
| KINETIC CONCEPTS, INC.<br>P.O. BOX 659508 |                  |                      | DEMILLE, DANTON D       |                |  |
| SAN ANTONI                                | O, TX 78265-9508 |                      | ART UNIT                | PAPER NUMBER   |  |
|                                           | •                |                      | 3764                    | •              |  |
|                                           |                  |                      | DATE MAILED: 03/03/2003 |                |  |

Please find below and/or attached an Office communication concerning this application or proceeding.

VAC.331A.US

DOCKETED BY:

| -                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Application No.                                                                                                                                                                         | Applicant(s)                                                                    |  |  |
|--------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|--|--|
|                                                  | Office Action Comments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 09/458,280                                                                                                                                                                              | VOGEL ET AL.                                                                    |  |  |
|                                                  | Office Action Summary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Examiner                                                                                                                                                                                | Art Unit                                                                        |  |  |
|                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Danton DeMille                                                                                                                                                                          | 3764                                                                            |  |  |
| Period for                                       | - The MAILING DATE of this communication apports Reply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | sears on the cover sheet with the o                                                                                                                                                     | orrespondence address -                                                         |  |  |
| - Extended after - If the - If NO - Failur - Any | ORTENED STATUTORY PERIOD FOR REPLY MAILING DATE OF THIS COMMUNICATION.  Insigns of time may be available under the provisions of 37 CFR 1.11 SIX (6) MONTHS from the mailing date of this communication.  Is period for reply specified above is less than thirty (30) days, a reply period for reply is specified above, the maximum statutory period vire to reply within the set or extended period for reply will, by statute reply received by the Office later than three months after the mailing and patent term adjustment. See 37 CFR 1.704(b). | 36(a). In no event, however, may a reply be the within the statutory minimum of thirty (30) day will apply and will expire SIX (6) MONTHS from Cause the application to become ARANDONE | nely filed s will be considered timely. the mailing date of this communication. |  |  |
| 1)[🛛                                             | Responsive to communication(s) filed on 20 E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <u>December 200</u> 2 .                                                                                                                                                                 |                                                                                 |  |  |
| 2a)[]                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | s action is non-final.                                                                                                                                                                  |                                                                                 |  |  |
| 3)  Dispositi                                    | Since this application is in condition for allowa closed in accordance with the practice under ton of Claims                                                                                                                                                                                                                                                                                                                                                                                                                                              | nce except for formal matters inc                                                                                                                                                       | osecution as to the merits is 53 O.G. 213.                                      |  |  |
| 4)⊠                                              | Claim(s) 1-17 is/are pending in the application.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | •                                                                                                                                                                                       |                                                                                 |  |  |
|                                                  | 4a) Of the above claim(s) is/are withdraw                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | л from consideration.                                                                                                                                                                   |                                                                                 |  |  |
|                                                  | Claim(s) is/are allowed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                         | • • • • • • • • • • • • • • • • • • • •                                         |  |  |
| <u> </u>                                         | Claim(s) <u>1-17</u> is/are rejected.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                         |                                                                                 |  |  |
|                                                  | Claim(s) is/are objected to.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                         |                                                                                 |  |  |
| 1                                                | Claim(s) are subject to restriction and/or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | election requirement                                                                                                                                                                    |                                                                                 |  |  |
|                                                  | on Papers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | oleccovi redali ci ricite                                                                                                                                                               |                                                                                 |  |  |
| 9) 🗆 T                                           | he specification is objected to by the Examiner.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                         | •                                                                               |  |  |
| 10) T                                            | he drawing(s) filed on is/are: a) accept                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ed or b) objected to by the Exan                                                                                                                                                        | niner.                                                                          |  |  |
|                                                  | Applicant may not request that any objection to the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                         |                                                                                 |  |  |
| 11) T                                            | he proposed drawing correction filed on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                         |                                                                                 |  |  |
|                                                  | If approved, corrected drawings are required in reply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                         | •                                                                               |  |  |
| 12) T                                            | he oath or declaration is objected to by the Exam                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | miner.                                                                                                                                                                                  |                                                                                 |  |  |
| Priority ur                                      | ider 35 U.S.C. §§ 119 and 120                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                         |                                                                                 |  |  |
| 13) [ A                                          | cknowledgment is made of a claim for foreign p                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | priority under 35 U.S.C. § 119(a)-                                                                                                                                                      | -(d) or (f).                                                                    |  |  |
|                                                  | All b)☐ Some * c)☐ None of:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                         |                                                                                 |  |  |
| 1                                                | . Certified copies of the priority documents                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | have been received.                                                                                                                                                                     |                                                                                 |  |  |
| 2                                                | . Certified copies of the priority documents t                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                         | n No.                                                                           |  |  |
|                                                  | 3. Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).  * See the attached detailed Office action for a list of the certified copies not received.                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                         |                                                                                 |  |  |
|                                                  | knowledgment is made of a claim for domestic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                         |                                                                                 |  |  |
|                                                  | ☐ The translation of the foreign language provis                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                         |                                                                                 |  |  |
| 15)∐ Ác                                          | knowledgment is made of a claim for domestic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | priority under 35 U.S.C. §§ 120 a                                                                                                                                                       | ind/or 121.                                                                     |  |  |
| Attachment(s                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                         |                                                                                 |  |  |
| 2) D Notice o                                    | of References Cited (PTO-892)<br>of Draftsperson's Patent Drawing Review (PTO-948)<br>tion Disclosure Statement(s) (PTO-1449) Paper No(s)                                                                                                                                                                                                                                                                                                                                                                                                                 | 5) Notice of Informal Par                                                                                                                                                               | PTO-413) Paper No(s) tent Application (PTO-152)                                 |  |  |
| .S. Patent and Trade                             | mark Office                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                         |                                                                                 |  |  |

|            | Notice of References Cited |                                                                                           |                 |           | Application/Control No. 09/458,280 Examiner |                                       | Applicant(s)/Patent Under Reexamination VOGEL ET AL. |                                       |
|------------|----------------------------|-------------------------------------------------------------------------------------------|-----------------|-----------|---------------------------------------------|---------------------------------------|------------------------------------------------------|---------------------------------------|
|            |                            |                                                                                           |                 |           |                                             |                                       | 376 <b>4</b>                                         | Page 1 of 1                           |
| _          |                            |                                                                                           |                 | U.S. PA   | TENT DOCUMENTS                              | <u>, l</u> _                          |                                                      |                                       |
| *          |                            | Document Number Date Country Code-Number-Kind Code MM-YYYY                                |                 |           | Name                                        |                                       |                                                      | Classification                        |
|            | A                          | US-5,222,478                                                                              | 06-1993         | Scarberr  | y et al.                                    |                                       |                                                      | 601/44                                |
|            | В                          | US-                                                                                       |                 |           |                                             |                                       |                                                      | 441744                                |
|            | C                          | US-                                                                                       |                 |           |                                             |                                       |                                                      |                                       |
|            | D                          | US-                                                                                       |                 |           |                                             | <del> </del>                          |                                                      |                                       |
|            | Ε                          | US-                                                                                       |                 |           |                                             |                                       |                                                      |                                       |
|            | F                          | US-                                                                                       |                 |           |                                             |                                       |                                                      |                                       |
|            | G                          | US-                                                                                       |                 |           |                                             |                                       |                                                      |                                       |
|            | Н                          | US-                                                                                       |                 |           |                                             |                                       |                                                      |                                       |
| ********** | 1                          | US-                                                                                       | ·               |           |                                             |                                       |                                                      |                                       |
|            | J                          | U\$-                                                                                      | -               |           |                                             |                                       |                                                      |                                       |
|            | к                          | US-                                                                                       |                 |           |                                             |                                       |                                                      |                                       |
|            | L                          | US-                                                                                       |                 | ^.        |                                             |                                       |                                                      |                                       |
|            | М                          | US-                                                                                       | _               |           |                                             | <del>-</del>                          |                                                      | <u> </u>                              |
|            |                            |                                                                                           | F(              | OREIGN PA | ATENT DOCUMENTS                             |                                       |                                                      |                                       |
| *          |                            | Document Number Country Code-Number-Kind Code                                             | Date<br>MM-YYYY | Соц       |                                             | Name                                  |                                                      | Classification                        |
|            | N                          |                                                                                           |                 |           |                                             | <del></del>                           |                                                      |                                       |
| _          | 0                          |                                                                                           |                 |           |                                             |                                       |                                                      | <u> </u>                              |
|            | Р                          |                                                                                           |                 |           |                                             |                                       |                                                      |                                       |
| 4          | Q                          |                                                                                           |                 |           |                                             |                                       |                                                      |                                       |
| $\bot$     | R                          |                                                                                           |                 |           |                                             |                                       |                                                      |                                       |
| 4          | 3                          |                                                                                           |                 |           |                                             |                                       |                                                      | · · · · · · · · · · · · · · · · · · · |
|            | T                          |                                                                                           |                 |           |                                             | · · · · · · · · · · · · · · · · · · · |                                                      |                                       |
|            |                            |                                                                                           |                 |           | NT DOCUMENTS                                |                                       |                                                      |                                       |
| - -        |                            | Include as applicable: Author, Title Date, Publisher, Edition or Volume, Pertinent Pages) |                 |           |                                             |                                       |                                                      |                                       |
|            | υ                          |                                                                                           |                 |           |                                             |                                       |                                                      | - <del> </del>                        |
| +          | _                          |                                                                                           |                 |           |                                             | <u> </u>                              |                                                      |                                       |
|            | v                          |                                                                                           |                 |           |                                             |                                       |                                                      |                                       |
| +          |                            |                                                                                           |                 |           |                                             |                                       |                                                      |                                       |
| ŀ          | w                          |                                                                                           |                 |           |                                             |                                       |                                                      |                                       |
| '          |                            |                                                                                           |                 |           |                                             |                                       |                                                      |                                       |
| +          | ×                          | •                                                                                         |                 |           |                                             |                                       |                                                      |                                       |

U.S. Petent and Trademark Office PTO-892 (Rev. 01-2001)

Notice of References Cited

Part of Paper No. 15

PAGE 31/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

Art Unit: 3764

Page 2

# **DETAILED ACTION**

## Claim Rejections - 35 USC § 103

- 1. Claims 1-5, 10-13, 17 are rejected under 35 U.S.C. 103(a) as being unpatentable over Jacobs et al. in view of Thorn et al. and Scarberry et al.
- 2. Jacobs teaches a foot wrap having an inflatable bladder for applying compressive force over the lower leg and foot of a patient. Jacobs also teaches that the foot wrap can be used in combination with a wound dressing column 6, lines 4-7. Clearly the inflatable bladder of Jacobs is capable of overlapping at least a portion of the wound dressing since it is taught that the releasable securing means allows the patient to take the device off to access the wound dressing. Thorn teaches a conventional wound dressing for introducing negative pressure over any area of the patient. Thorn uses a porous material as the first layer 7 and uses felt as an example material. There is no unobviousness to use any other equivalent porous material as an obvious equivalent alternative. Felt is not the only material that can be used. Scarberry teaches a wrap system that also applies a vacuum to a portion of the body and uses open celled foam as the first layer. Clearly open celled foam is an obvious equivalent alternative material to the felt of Thorn. It would have been obvious to one of ordinary skill in the art to modify Jacobs to use the foot wrap in combination with a wound dressing as taught by Thorn in order to complement the teaching of Jacobs and use open celled foam as taught by Scarberry as an obvious equivalent alternative material to the felt of Thorn to maintain the vacuum pressure over the wound. The free and open arrangement of the Jacobs wrap allows free placement of the wound dressing anywhere desired or required. Regarding claim 13, Thorn teaches a layer 7 of porous material. The porous material can be of any well known design as long as it maintains the space between the skin and

Art Unit: 3764

Page 3

the second layer 8. Open celled elastic foam is just such a conventional material and an obvious provision.

3. Claims 1-17 are rejected under 35 U.S.C. 103(a) as being unpatentable over Tumey et al. in view of Thorn, Scarberry et al. and Jacobs et al. Turney teaches a foot wrap having an inflatable bladder for applying a compressive force to the patient's foot. Jacobs teaches the convention of using wound dressings in combination with inflatable foot wraps and Thorn exemplifies wound dressings that apply a negative pressure. Scarberry teaches the open celled foam as an obvious equivalent alternative material for the felt of Thorn. It would have been obvious to one of ordinary skill in the art to modify Tumey to include a wound dressing with the wrap as taught by Jacobs to be able to additionally treat wounds and to use the specific type of wound dressing as taught by Thorn as an obvious example of wound dressings with open celled foam as the first layer spacing material as taught by Scarberry as an obvious equivalent alternative. Tumey additionally teaches the convention of pressure sensors 47 to control pressurization. Tumey teaches the pressure source is intermittently operable. Thorn teaches the vacuum source can be operable to vary the negative pressure in a preprogrammed manor to provide the desired effect. The art teaches intermittent pressure application therefore providing intermittent negative pressure would have been obvious to provide the desired therapeutic effect.

ddd

26 February, 2003 (703) 308-3713

Fax: (703) 305-3590

danton.demille@uspto.gov

Danton DeMille
Primary Examiner
Art Unit 3764

. 1

ž

#### US005222478A

[11] Patent Number:

5,222,478

[45] Date of Patent:

Jun. 29, 1993

| [54] APPARATUS FOR APPLICATION OF PRESSURE TO A HUMAN BODY |
|------------------------------------------------------------|
|------------------------------------------------------------|

United States Patent [19]

[76] Inventors: Engene N. Scarberry, 208 Terrace Ct. Rd., Trafford, Pa. 15085; Patrick M.

Handke, 416 Brumer Dr., Monroeville, Pa. 15146

[21] Appl. No.: 895,225

Scarberry et al.

[22] Filed: Jun. 8, 1992

# Related U.S. Application Data

[63] Continuation of Ser. No. 412,627, Sep. 27, 1989, abandoned, which is a continuation-in-part of Ser. No. 273,587, Nov. 21, 1988, abandoned.

डिडी

#### References Cited

#### U.S. PATENT DOCUMENTS

| THE TALEST DOCUMENTS                |                  |                             |          |  |  |  |
|-------------------------------------|------------------|-----------------------------|----------|--|--|--|
| 417901200                           | 1/1943<br>9/1949 | Terhase                     | 128/30.2 |  |  |  |
| 2,899,933<br>3,043,292<br>3,078,842 | 7/1962           | Huxley, III et al Mendelson | 128/30.2 |  |  |  |

| 3,212,497 | 10/1965 | Dickinson 128/DIG. 20 3 |
|-----------|---------|-------------------------|
| 3,577,977 | 5/1971  | Ritzinger, Jr. et al    |
| 3,745,998 |         | Rose .                  |
| 4,257,407 |         | Macchi .                |
| 4,366,815 |         | Broomes .               |
| 4,508,112 | 4/1985  |                         |
| 4,523,579 | 6/1985  | Barry .                 |
| 4,617,921 | 10/1986 | Secler .                |
| 4,621,621 | 11/1986 | Marsalis .              |
| 4,657,003 | 4/1987  | Wirtz 128/869           |
| 4,664,098 | 3/1987  | Woudenberg et al        |
| 4.739,755 | 4/1988  | White 128/206.12        |
| FOR       | eign p  | ATENT DOCUMENTS         |

Primary Examiner—Richard J. Apley
Assistant Examiner—Linda C. M. Dvorak
Attorney, Agent, or Firm—J. Stewart Brams

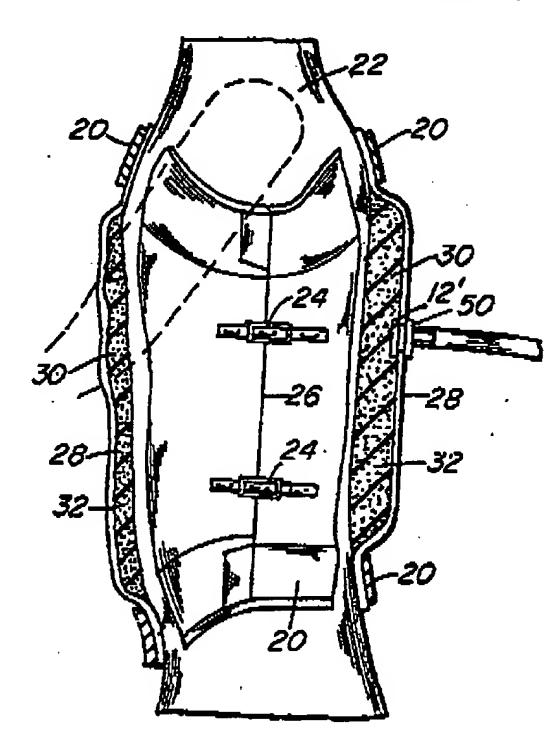
[57]

602/13

#### ABSTRACT

A respirator, resuscitator, wrap or sheath, breathing mask or the like which provides a closely form-fitting shell adapted to be disposed adjacent a portion of a human body to form intermediate the shell and the human body portion a thin section, minimal volume pressure containment chamber which receives pressures varying from ambient pressure for therapeutic purposes, and a corresponding method.

30 Claims, 2 Drawing Sheets

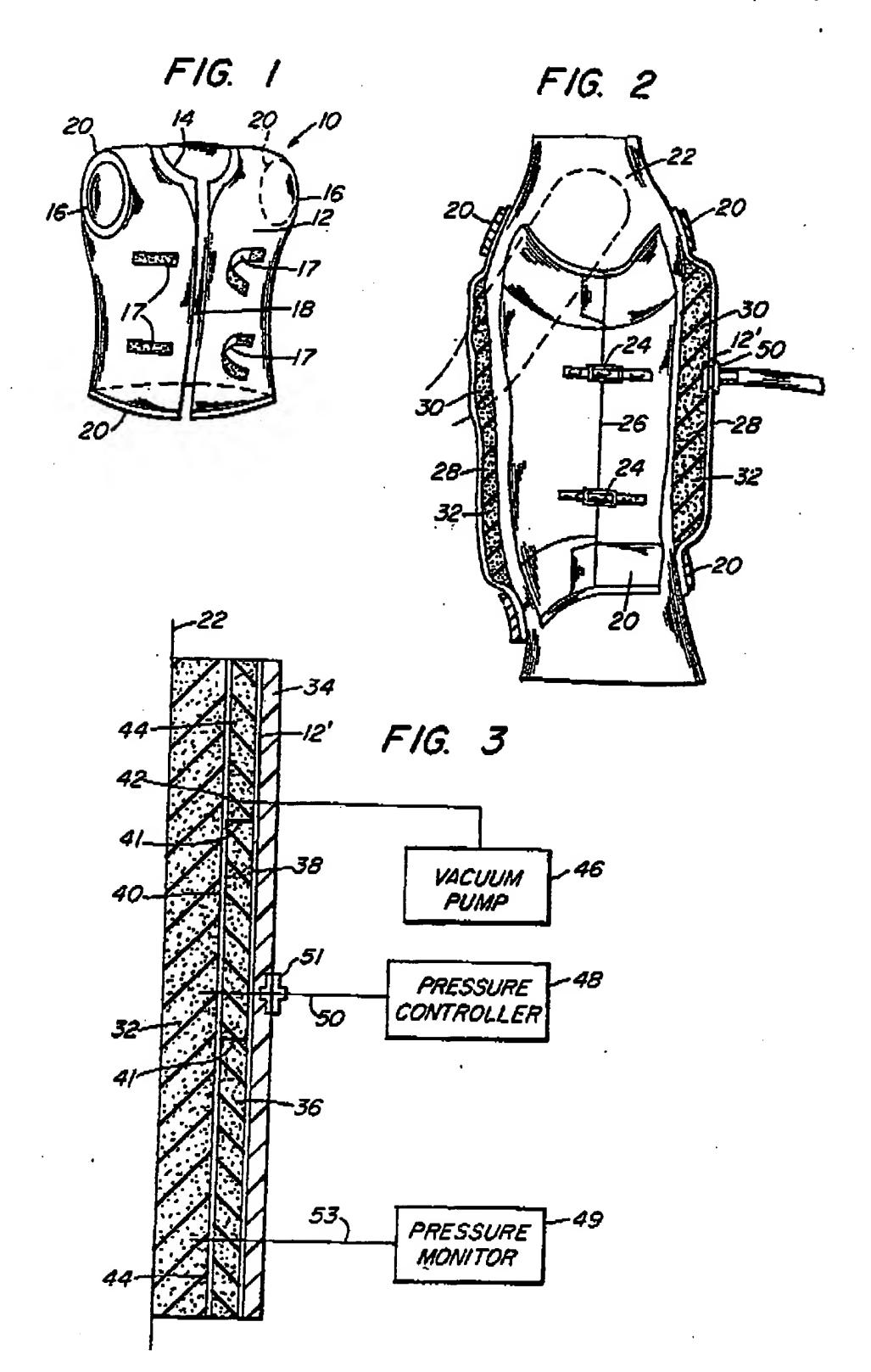


U.S. Patent

June 29, 1993

Sheet 1 of 2

5,222,478



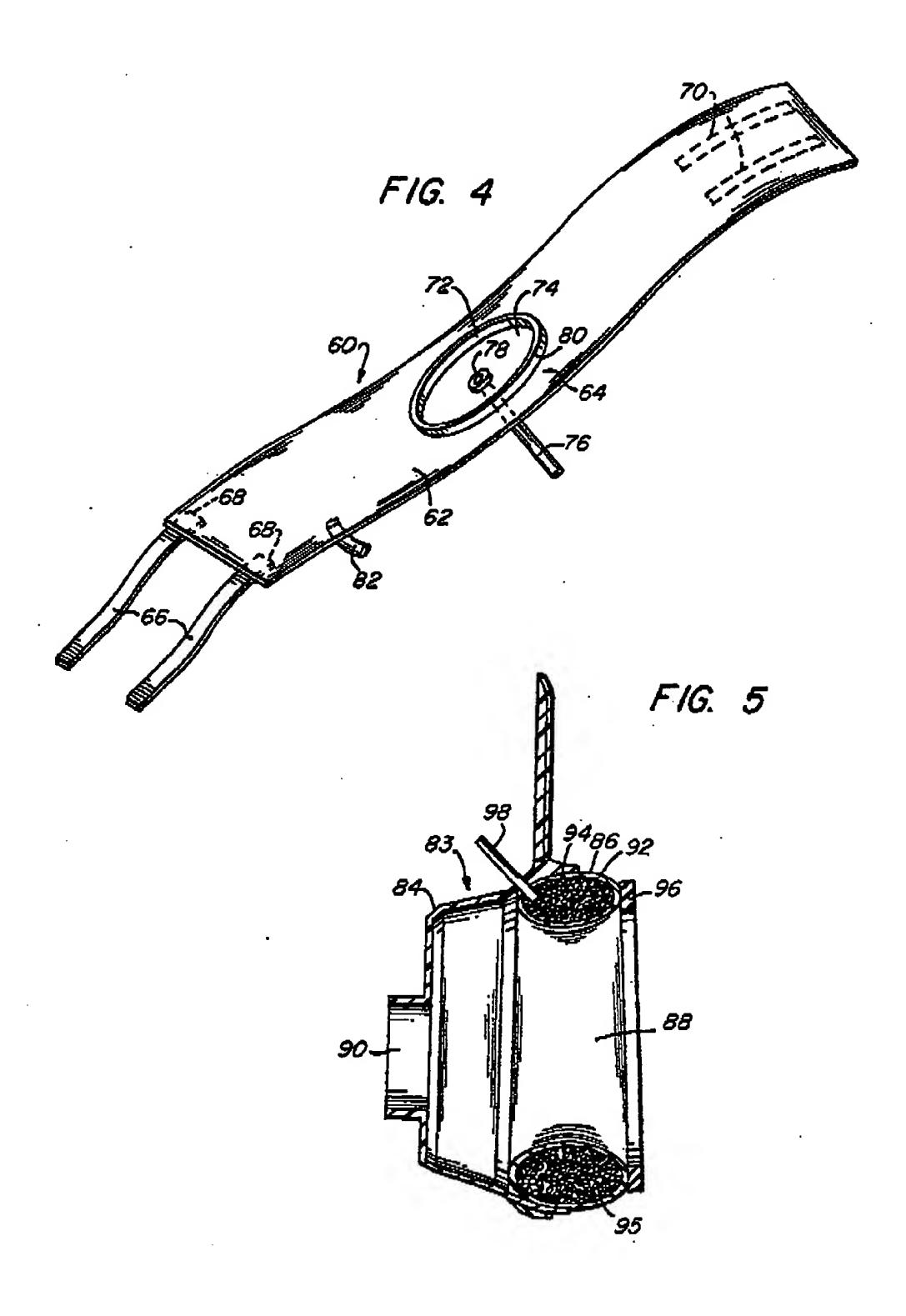
PAGE 35/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

U.S. Patent

June 29, 1993

Sheet 2 of 2

5,222,478



1

## APPARATUS FOR APPLICATION OF PRESSURE TO A HUMAN BODY

This application is a continuation of co-pending application Ser. No. 07/412,627 filed on Sep. 27, 1989, now abandoned which is a continuation-in-part of application Ser. No. 07/273,587 filed Nov. 21, 1988, now abandoned.

#### BACKGROUND OF THE INVENTION

In the art of respirators, resuscitators, and the like it is well known to provide apparatus in the form of an enclosure which encompasses a portion of the human body such as the upper torso or thoratic region thereof 15 to provide within the confines of the enclosure a pressure containment chamber wherein pressure variations may be applied to the body to stimulate respiration. A wide variety of such devices are known, the following prior art being representative.

U.S. Pat. No. 3,078,842 discloses a resuscitation apparatus which employs a rigid shell to enclose the torso of a human body. U.S. Pat. No. 4,523,579 discloses another rigid shell type body respirator having flexible side walls. U.S. Pat. No. 2,241,444 discloses a respirator 25 jacket comprised of a rigid shell made by laying up reinforced plaster of parts material on a plaster cast which has been molded to the body contours of the individual user, and which includes an enlarged cavity confronting the chest and adjacent abdominal region of 30 the user. Other rigid shell type resuscitators are disclosed by U.S. Pat. No. 4,257,407 and 2,309,361. The latter of these discloses a padded liner in a rigid generally form-fitting respirator.

U.S. Pat. No. 2,899,955 discloses a respirator belt 35 which encircles the waist of a user and includes an inflatable bladder to which air pressure is directed for assisted breathing. U.S. Pat. No. 4,621,621 discloses a respirator including a rigid wire cage that encompasses a portion of a user's body and is in turn encompassed by 40 an air tight cover to provide a vacuum chamber surrounding the user's body. U.S. Pat. No. 3,577,977 discloses a flexible, inflatable bladder-type jacket and U.S. Pat. 2,480,980 discloses a rigid, generally form-fitting respirator jacket. Finally, U.S. Pat. No. 4,664,098 discloses a cardio-pulmonary resuscitator which is worn by a patient in the manner of a belt encompassing the abdominal region.

Notwithstanding such known devices, practitioners in the art have continued to seek improved body respisors. For example, improvements have been continually sought in body respirator compactness, portability, user comfort, reduced power requirements, and of course improved therapeutic efficacy.

Also known in the prior art are a variety of vacuum 55 devices for immobilizing a part of a body. The Rapid Form TM brand vacuum splint is one example. Such devices utilize a structure known as vacuum beads to provide a selectively rigid or flexible member that is used, for example as in the case of the above specified 60 vacuum splint, to immobilize selected body parts that have sustained bone fractures or the like. Such known devices generally comprise a thin section airtight envelope filled with material such as styrofoam beads which interengage and deform upon application of a vacuum 65 within the envelope to thereby render the vacuum bead material relatively rigid. The rigid vacuum bead material relatively rigid. The rigid vacuum bead material thus is utilized to immobilize a selected body part.

#### BRIEF SUMMARY OF THE INVENTION

The present invention contemplates a novel and improved body respirator, resuscitator, pressure or pulse monitoring apparatus or similar apparatus such as a wrap or sheath, or a breathing mask which is universal in its application by virtue of its being very closely form-fitting for any selected user irrespective of variations in body size or contours from one user to another. The invention also is light in weight and compact, imposes minimal power requirements for its use, and provides greatly enhanced user comfort and therefore enhanced user tolerance. The invention thus provides greatly enhanced convenience for the user as well as for emergency rescue teams and others who may encounter the need for regular access to emergency equipment of this sort, among other advantages. The invention also contemplates a novel and improved method for the use of varying pressures in a variety of medical applications.

The apparatus of this invention contemplates, in one of several presently preferred embodiments, a body enclosure comprised of a sheath or wrap of selectively flexible or rigid material, such as the above characterized vacuum bead structure or the like, formed to encompass a selected body portion and including seals to seal perimeteral portions or other portions of the body sheath, for example to seal about the openings through which adjacent body portions project such as at the waist, neck, or arms.

The sheath is adapted to be placed in closely spaced form-fitting relation encompassing a portion of the user's body to define, in a zone between the sheath and the user's body, a very thin-section chamber or space. The sheath is then selectively rigidified, as by application of a vacuum if comprised of conventional vacuum bead material, to form a rigid, form-fitting enclosure about the encompassed portion of the patient's body whereby the chamber or space between the sheath and the user's body is provided with a rigid outer wall which closely conforms to the adjacent body contours of the user. Pressure or vacuum generating equipment may be utilized to apply pressure variations within this space to act on the flexible inner wall (i.e. the user's body) to assist user ventilation or for other purposes. Alternatively, the pressure within the space may be observed to monitor user pulse, breathing, or the like.

Because the sheath is selectively rendered rigid or flexible, it is quite compact and easily stored when not in use. Because it is placed about the user's body in a flexible state, it is universal in application and extremely closely form fitting with the attendant benefit that the containment space defined between the sheath and the user's body is of minimal volume. Effective operation thus is achieved with minimal power requirements and minimal required compressor or vacuum pump delivery rates.

The invention additionally contemplates spacer means disposed within the pressure containment space between the sheath and the user's body so as to define a predetermined minimal spacing therebetween so that the form and volume of the pressure containment space may be readily controlled. The spacer means is of a structure (e.g. open cell foam) to permit pressure variations introduced at one point within the containment space to be transmitted throughout the space even if the spacer means is substantially co-extensive with the pressure containment space.

3

The invention additionally contemplates a novel and improved method of fluid pressure utilization in conjunction with the body of a user with advantages corresponding to the above noted and other advantages of the novel apparatus.

It is accordingly one object of our invention to provide a novel and improved body respirator, resuscitator, or the like.

It is a further object of our invention to provide an improved apparatus and method for the utilization of 10 external pressure in the medical treatment of a patient.

A more specific object of the invention is to provide a selectively rigid or flexible body wrap sheath, mask, vest, or similar apparatus which is adapted to encompass a portion of a body to thereby define in conjunction 15 therewith a scaled space adjacent the body such that pressure controlling or monitoring means cooperable with the sheath is operable to selectively vary or monitor the pressure within the scaled space.

#### BRIEF DESCRIPTION OF THE DRAWINGS

These and other objects and further advantages of my invention will be more readily understood upon consideration of the following detailed description and the accompanying drawings, in which:

FIG. 1 is a frontal elevation of one presently preferred embodiment of our invention:

FIG. 2 is a side elevation, partially broken away to show details of an alternative embodiment of our invention shown encompassing the body of a user;

FIG. 3 is an enlarged detailed portion of FIG. 2 including schematic representation of a vacuum pump and pressure controller according to one presently preferred embodiment of the invention:

FIG. 4 is a perspective view of a wrap or sheath 35 apparatus according to an alternative embodiment of the invention; and

FIG. 5 is a sectioned side elevation of a breathing mask or similar apparatus according to another alternative embodiment of the invention.

There is generally indicated at 10 in FIG. 1 a body respirator of the like constructed according to one presently preferred embodiment of our invention and including a body sheath 12 formed for purposes of this embodiment as a vest or jacket and including, when 45 enclosed about the user's body, a neck opening 14 as well as arm holes of spertures 16.

Suitable fasteners are provided, for example Velcro TM or similar interengaging tapes, to maintain a front opening 18 tightly closed and sealed when the vest 50 is donned and in use, and to thus maintain the sheath 12 in closely form-fitting relation about the upper torso or thoratic region of the user's body.

An alternative form of the sheath or vest as identified at 12' in FIG. 2 passes beneath the arms of the user so no so contains a man holes are required. The sheath 12' encompasses the user's waist and upper chest. For the embodiments shown in FIGS. 1 and 2, all openings from which parts of the user's body project are sealed by suitable seal means such as encompassing band means 20 to form 60 the space 42. As is known user a sealed space or chamber 32.

Other differences of the FIG. 2 embodiments from that of FIG. 1 include buckle and strap fasteners 24 in lieu of fasteners 17 and the location of closure 26 adjacent one side of the user's body rather than extending vertically along user's front as does opening 18 of the FIG. 1 embodiment. Of course, a wide variety of alter-

native configurations may be utilized in accordance with the specific purposes and desired features of the sheath 12. Specifically, an apparatus according to this invention but adapted to encompass a body part other than the chest or abdominal region will of course be configured accordingly.

Regarding further aspects of the invention, as exemplified by FIG. 2, sheath 12' comprises a selectively rigid or flexible wall system 28 which is maintained in closely spaced relationship with respect to the user's body 22 as by means of spacers 30, which may be of such suitable structure as open cell foam to permit the transmission of pressure variations imposed at one location within the confines of the sheath 12' to all locations therein.

The spacers 30 may occupy only a small portion or alternatively substantially all of the volume of the space 32 defined intermediate sheath 12' and the user's body 22, within the confines of perimeteral seals 20. It will be noted, however, that space 32 need not be coextensive with the mutually contiguous zones of sheath 12' and the user's body 22, that spacers 30 may be of other suitable structure or may be eliminated entirely, and that seals 20 need not be disposed about perimeteral portions of the sheath 12' where portions of the user's body extend therefrom.

The invention thus contemplates an apparatus which is utilized to form a scaled space between a body sheath and a user's body with the sealed space being defined generally by an inner wall system comprised of a portion of the user's body, an outer wall system comprised of a corresponding adjacent portion of a sheath wall disposed in closely spaced form-fitting relation with respect to the user's body. A scal system seals all interespect to the user's body. A scal system seals all interespect to pressure variations introduced within the exposed to pressure variations introduced within the sealed space.

It is noted that seals are to be provided to seal any opening which is provided to facilitate installation or temoval of the sheath, for example opening 18 of FIG. 1 or 26 of FIG. 2. These and any other such openings would require seals to preclude leakage due to a pressure differential between ambient and the pressure condition within space 32.

There is shown in FIG. 3 a portion of my novel body respirator. In FIG. 3, sheath 12' is comprised of an outer flexible shell 34 of sheet polyethylene for example, which is coextensive with the selectively rigidified structure 36. Structure 36 comprises a pair of flexible, closely spaced, air impermeable inner and outer walls 38 and 40 of such suitable material as vinyl or polyeure-thane impregnated nylon. The inner and outer walls 38 and 40 are scaled together along a continuous line encompassing a space 42 therebetween, which space 42 contains a mass of interengageable elements 44 such as beads of styrofoam plastic. Air permeable partition elements 41 joined to and extending between walls 40 and 38 may be provided at intervals in space 42 as barriers to prevent undesirable migration of beads 44 within the space 42.

As is known, the above described structure is typical of vacuum bead type systems wherein the application of a vacuum within space 42, as by means of a vacuum pump 46, causes walls 40 and 38 to collapse inwardly under the impetus of external ambient air pressure against the beads 44. Thus, upon imposition of such a vacuum in space 42, the styrofoam beads 44 deform in interengagement and lock up in an immobilized state to

form a rigid shell from the previously flexible shell. Upon release of the vacuum drawn within space 42, the styrofoam beads 44 are released from their mutual interengagement and the vacuum bead structure 36 becomes once again flexible.

Carried adjacent the inner wall 40, and preferably affixed thereto in a suitable manner is the spacing material 32 as above characterized. In use, the innermost extent of the spacing material 32 engages the body of the user 22 to thereby establish and maintain a generally 10 uniform spacing or separation between the sheath 12' and the user's body 22.

Of course, the spacing therebetween is uniform only if the spacer element 32 is of uniform thickness. More generally, the spacing between sheath 12' and user's 15 body 22 may vary according to variation in the thickness of the spacing elements 32. Also, and as noted hereinabove, the spacing element 32 may be omitted entirely as it is contemplated that only a very thin section space generally is necessary between the user's 20 body and the sheath 12' for effective operation of the invention.

As further shown in FIG. 3, the invention additionally comprises a pressure controller 48 which is powcred by any suitable and conventional power means to 25 deliver air flow under pressure to space 32 in order to impose within space 32 controlled pressure at variance with ambient atmospheric pressure. For example, pressure controller 48 may be utilized to impose alternating or cyclic elevated pressure within space 32, or a partial 30 vacuum.

In order to accommodate the pressure controller 48, a suitable air flow delivery conduit 50 provides an air flow path between pressure controller 48 and space 32, and of course therefore traverses the sheath 12. In a 35 preferred embodiment the sheath 12' will include a port means having any suitable, known coupling 51 or air conduit connection on the outer side thereof for connection to a delivery conduit from pressure controller

For emphasis it is reiterated here that the apparatus of this invention may take any of a variety of forms to encompass any portion of a user's body other than the chest or thoratic region and for a variety of purposes other than respiratory assistance. For example, an appa- 45 ratus similar in many salient respects to that above described and encompassing the thoratic region may be utilized with alternating pressure, and in conjunction with alternating pressure delivered in a specified phased heart pump for cardio-vascular resuscitation. In another alternative mode of use, the apparatus of this invention may be utilized with pressure monitoring equipment 49 (FIG. 3) which is connected via a conduit 53 to space 32 for the purpose of monitoring pressure therein. Thus 55 nection 90. any physical response of a user which causes variation of the pressure within space 32, pulse or spontaneous breathing for example, may be observed by use of pressure monitor 49. The invention may also be embodied as a wrap or sheath as above mentioned, for example a 60 wrap or sheath for a limb or other extremity. In FIG. 4 I have shown such a wrap or sheath 60 which is adapted to encompass a human limb or any similarly configured body part, for example, the neck. The sheath 60 is comprised of an elongated flexible band 62 which forms an 65 clongated, thin section envelope 64 that contains therein material such as styrofoam beads similar in all salient respects to the above described vacuum bead structures.

Fastener bands 66 are affixed adjacent one longitudinal end of band 64 as by stitching 68 and cooperating fastener strips 70 are similarly affixed adjacent the opposed end of band 62. Fastener strip 66 and 70 may be cooperating hook and loop type fastener strips such as Velcro TM brand fastener material.

Sheath 60 may also include seal means such as a patch scal 72 in the form of a foam rubber or similar scaling strip affixed to one side of band 62 intermediate its longitudinal ends and forming thereon a closed perimeter which defines within its confines a space 74. A suitable vacuum connection 76 communicates with space 74, for example by penetrating the band 62 via a fitting 78 within the confines of scal 72. The sheath 60 thus may be applied to a human limb or similarly configured body part as a wrap with the fastener strips 66 and 70 overlapping to maintain the band 62 in encompassing relationship on such a body part and with an outer seal surface 80 of seal member 72 engaging a corresponding surface portion of such body part continuously along the extent of scal 72. By application of vacuum as via a vacuum connection 82, the band 62 may be selectively rigidified in encompassing relationship about a human limb as described. In an alternative embodiment, the selectively rigidified part of band 62 may be limited to that part encompassed by seal 72.

For either embodiment, the application of vacuum to... the band 62 as described forms a relatively rigid outer wall for space 74 with the inner wall thereof being that portion of the patient's body encompassed by seal 72. Accordingly, pressures varying from ambient atmospheric pressure may be applied for therapeutic effect to that portion of the patient's body exposed to such pressure variation within the confines of seal 72 in much the same manner as pressure variations are applied to the upper thoracic region as above described with reference to FIGS. 1 through 3.

Specifically, since the outer wall of space 74 is rigid, the application of elevated pressure above ambient pres-40 sure via connection 76 in space 74 will tend to compress the corresponding adjacent portion of the patient's body which forms the inner wall of space 74 whereas a partial vacuum within space 74 will tend to distend the adjacent body portion by drawing it into the space 74.

Another alternative embodiment of the invention is shown in FIG. 5 as a breathing mask 83 having a generally rigid body 84 which carries a seal assembly 86 that eucompasses an open space 88 which communicates through body 84 with a gas supply connection portion relationship to the airway of a patient to function as a 50 90 of mask body 84. Accordingly, mask 83 may be placed with seal assembly 86 in confronting engagement with a user's face so that seal assembly \$6 encompasses the nose or the nose and mouth of a user. Breathing gas for the user is then supplied exclusively through con-

Since the function of a breathing mask such as shown in FIG. 5 differs from the function of a body type respirator such as shown in FIGS. 1 through 3, the expanse of space within the confines of seal 86 need not be enclosed by the vacuum bead material to provide a rigid outer wall such as is required for the respirator of FIGS. 1 through 3. Rather, for the FIG. 5 embodiment of the invention, the function of vacuum bead structure as described hereinbelow is to provide an effective and and closely conforming surface scal to fit a wide variety of user facial contours in more or less universal fashion whereby a single mask may be readily adapted for use by virtually any patient.

Accordingly, it will be seen that seal assembly 86 comprises a flexible perimeteral wall system 92 comprised of rubber for example, and formed in a closed ring with a generally tubular cross section. The space 94 closed within the wall system 92 is filled preferably with 5 vacuum bead material such as above described with reference to FIGS. 1 through 3, for example styrofoam plastic beads.

The resilient wall element 92 is mounted upon mask body member 84 and extends outwardly therefrom, and 10 a seal member 96 may be affixed to an outer extent of wall element 92 for confronting scaling engagement with a user's face. A vacuum connection 98 is provided to permit drawing a partial vacuum upon space 94 with seal 96 in engagement with that portion of a user's face 15 encompassing the nose or the nose and mouth. The partial vacuum, acting on the mass of interengageable bends, causes them to become forcefully interengaged under the impetus of ambient atmospheric pressure compressing the flexible wall element 92 inwardly. The 20 mass of beads thus becomes rigid and supports the wall 92 against inward collapse. The wall 92 thus holds whatever form it and the contained beads have assumed by virtue of scaling pressure against the face of a user. Accordingly, the mask 83 is effective universally for 25 any user as the seal thereon readily conforms, and is maintained in conforming relationship to the user's face by virtue of operation of the vacuum bead apparatus as described.

For purposes of this invention, including all embodi- 30 ments described hereinabove, the structure of the vacuum bead material may include a variety of alternatives including styrofoam beads as above described or alternatively a finely divided powder with similar mechanical properties. Additionally, the material within the 35 vacuum envelope may be infused or coated with a bonding agent such as a heat curing adhesive to permit the set or shape of the vacuum bead structure, once established by the vacuum action, to be permanently maintained. This is done by subjecting the vacuum bead 40 material to sufficient activating or curing energy such as heat for curing a heat cured adhesive. Other types of bonding systems may also be used, for example chemical curing systems pressure sensitive adhesives, photo sensitive or light curing systems, and so forth. Any 45 adhesive will suffice which provides the function of maintaining the shape or form of the vacuum bead structure after release of the vacuum by bonding the individual vacuum beads or similar elements together. setting adhesives, would for all practical purposes be limited to use in a structure as described which is to be permanently maintained in the form suited to a particular user. That is, once the heat setting adhesive is cured, it would not be possible to re-use the same adhesive. By 55 contrast, a hot melt adhesive or similar bonding system would permit re-use of a mask or respirator structure according to this invention for another user as the bonds between interengaged vacuum beads could be broken by mechanical force (i.e. massaging or kneading the 60 vacuum bead envelope). The mask or respirator could then be fitted to a different user, the vacuum applied to maintain the resulting seal and/or space configuration, and the vacuum bead material then once again subjected to heat to melt the adhesive and bond the vacuum 65 bead materials in the new configuration.

The seal 96 of FIG. 5 or corresponding seal elements from other disclosed embodiments similarly may take a

variety of forms including a rubber surface seal as shown, or alternatively an inflated bladder seal filled with air, four or gel, a flap seal, or the like. Any of these may include a tacky outer surface for engagement with the respective body part of a user to provide sealing with a user's body in part by temporary, releasable adhesion to the skin. Another scal structure contemplated includes a closed envelope containing a hydroscopic gel material which has cushioning properties and a tacky character such that the seal is resilient at low mechanical loads but is permanently deformed by larger loads. The air filled bladder seal generally may be a tubular bladder with air space encircling a space similar to 94 that contains therein vacuum beam material or any alternative as above discussed. In addition, it is contemplated that the outer surface of wall 92 may function itself as a seal for confronting engagement with a body portion of a user such that a separate seal member such as at 96 in FIG. 5 may be entirely eliminated.

In an additional alternative embodiment applicable to any of the above described structures, the invention may be comprised of a body member which carries a separate, replaceable vacuum bead liner structure as opposed to having the vacuum bead structure permanently installed with other elements of the invention.

One advantage of the mask structure of FIG. 5 is that when vacuum is applied via connection 98, the vacuum bead material 95 will be maintained in a rigid form defining an outer profile for sealing in close conformity to the face of a user; however, if leaks should be present in such a seal, the vacuum bead material 95, even when under vacuum, can be formed or molded by the application of mechanical pressure (i.e. finger pressure) to change the seal profile or configuration. Accordingly, if leaks are detected after application of vacuum, the medical practitioner can eliminate such leaks with mere finger pressure applied against wall element 92 adjacent the leak. Such mechanical pressure will displace the wall 92 inwardly thus moving or displacing the immediately adjacent vacuum beads. Since under such relatively small and non-uniform mechanical pressures the individual beads are not significantly compressed but merely redistributed, mechanical finger pressure as described will force some of the vacuum bead material outwardly in the direction of seal 96 to thereby close the leak. Thus, with the combination of direct fitting to the face of the user, application of vacuum to maintain resulting shape, application of mechanical pressure as needed to effect proper seal conformity with the user's Some adhesive systems, such as heat curing or heat 50 face, and finally application of heat or other mechanism to set an adhesive supplied within space 94 to the vacuum bead material 95, the mask 83 provides for a custom fit to any user, which custom fit is then maintained indefinitely for as long as that user must use the mask. The same mask may then be reused to fit any other user with a similar custom fit to provide seal integrity of equal quality.

In still another alternative embodiment of the invention, the vacuum bead material 95 may be supplanted entirely by a heat cure or similar adhesive in powder, granular or bead-like form. Although such a structure is believed to be less useful for repeated universal applications, it would be the equal of other above described embodiments for providing a closely conforming seal in a single use for any user irrespective of differences in facial contours.

Entirely similar structural alternatives as above disclosed also are contemplated for the embodiments of 9

FIGS. I through 4 inclusive, and for still further embediments not heretofore discussed. For example, the disclosed mask structure also contemplates such alternatives as a mask effectively functioning as a perimeteral seal with masal cannulae protruding within space 5 88 to be received into the pares of a user.

From the above description, our novel method will also be apparent as including, inter alia, the steps of encompassing or enclosing a patient's body portion with a flexible structure including a seal to provide 10 sealing against selected body portions to form a chamber or enclosed space, and rigidifying at least a part of the structure to provide a rigid boundary for a corresponding part of the enclosed space then one may, selectively vary the pressure condition within the enclosed space from ambient either at will or in a predetermined program of pressure variation, or by voluntary or involuntary patient response, and as a further optional step, such pressure variation occurring within the enclosed space may be monitored.

According to another aspect of our novel method, the encompassing of a patient's body portion with a flexible sheath as hereinabove specified may be performed as a treatment for obstructive sleep apnea. Sleep apnea is a widespread sleep disorder estimated to affect 25 up to 3% or more of the general population and commonly characterized by occlusion of the upper airway in sleep with resultant disruption of breathing and sleep patterns, and potential serious consequences including oxygen starvation.

The method of our invention accordingly contemplates the application of negative pressure (i.e. pressure below ambient atmospheric) at least to frontal areas of a patient's neck to thereby draw out or distend the adjacent tissue thus permitting the relatively elevated ambient pressure in the airway, or artificially elevated pressure therein such as CPAP (continuous positive airway pressure), to expand or distend the upper airway thereby relieving airway occlusion.

According to the description hereinabove there is 40 provided by the instant invention a novel and improved method and apparatus for the external application of pressure variations to a portion of a user's body. The invention may be utilized to apply pressure at decreased or elevated magnitude with respect to ambient, or in a 45 program of varying pressure magnitudes applied by automatic or manual control, or even pressure variations from ambient or from elevated or decreased pressure magnitudes resulting from voluntary or involuntary user response. The invention further contemplates 50 the monitoring of any such pressure magnitude or variation thereof.

The invention also contemplates an apparatus comprised of separate inner garment, vacuum bead shell, and outer garment structures. The inner garment may be, for example, a foam rubber shell bonded to a fabric backing for the purpose of separating the vacuum bead structure from the user's body. The outer garment may be of the character above described with reference to flexible shell 34, and may include all of the requisite 60 form said enclosed space. 8. The apparatus as set including adjustable reten able with said sheath mean used separately to make up a flexible body enclosing 65 grant that the apparatus as above described.

I have contemplated various other alternative and modified embodiments apart from those specified here-

inabove, and certainly such would also occur to others versed in the art once apprised of my invention. Accordingly, the invention is to be construed broadly and limited only by the scope of the claims appended hereto. I claim:

1. An apparatus for applying external pressure variation to a given body portion of a user's body comprising:

a sheath means adapted to be retained with respect to the given body portion:

said sheath means including a flexible portion which is adapted to be formed into a selected shape which closely conforms with the given body portion to provide a closely form-fitting enclosure which envelopes the given body portion at essentially a minimum spacing therefrom when said sheath means is retained with respect to the given body portion;

said sheath means including seal means which is operable to engage the user's body to form within said form-litting enclosure an enclosed space intermediate said sheath means and the given body portion;

space and adapted to be connected to a pressure medium source for applying the pressure of a pressure medium at variance from ambient atmospheric pressure within said enclosed space; and

means operable for selectively rigidifying said flexible portion when retained with respect to the given body portion in a manner that upon said selectively rigidifying, said flexible portion is maintained in said selected shape to provide said closely form fitting enclosure at said essentially minimum spacing throughout application of pressure within said enclosed space.

2. The apparatus as set forth in claim 1 additionally including pressure control means cooperable with said sheath means to selectively vary the magnitude of pressure within said enclosed space.

3. The apparatus as set forth in claim I additionally including pressure transmitting spacer means cooperable with said sheath means to limit the approach of said flexible portion toward the given body portion and to thereby define said minimum spacing.

4. The apparatus as set forth in claim 3 wherein sp' 1 spacer means is substantially mutually coextensive with said enclosed space.

5. The apparatus as set forth in claim 4 wherein said spacer means includes porous means having sufficiently open porosity to permit the pressure medium to be distributed substantially throughout said enclosed space.

6. The apparatus as set forth in in claim 4 wherein said flexible portion is essentially coextensive with said sheath means.

7. The apparatus as set forth in claim 1 wherein said seal means includes means cooperable with said sheath means to maintain a selected portion of said sheath means in sealed engagement with the user's body to form said enclosed space.

8. The apparatus as set forth in claim 1 additionally including adjustable retention means which is cooperable with said sheath means to permit said sheath means to be retained with respect to the given body portion.

9. The apparatus as set forth in claim 1 wherein said means operable for selectively rigidifying said flexible portion includes a flexible, wall portion of said sheath means enclosing a sealed chamber and a plurality of

11

interengageable elements confined within said sealed chamber, and means communicating with said sealed chamber and adapted to communicate with a vacuum pump means for drawing a partial vacuum within said sealed chamber to thereby engage said interengageable 5 elements in essentially rigid mutual interengagement.

10. The apparatus as set forth in claim 9 additionally including an outer flexible wall portion which is coextensive with said flexible portion and said outer flexible wall portion carrying adjacent at least a portion of its 10 perimeter a portion of said seal means.

11. The apparatus as set forth in claim 10 additionally including air flow conveying conduit means traversing said sheath means and cooperable with said pressure medium source to provide air flow to and from said 15 enclosed space.

12. The apparatus as set forth in claim I additionally including pressure monitoring means cooperable with said sheath means to monitor the pressure within said enclosed space.

13. The apparatus as set forth in claim 1 wherein said sheath means comprises a respiratory assistance apparatus adapted to encompass the upper torso of a human body for application thereto of such pressure to effect respiratory assistance.

14. The apparatus as set forth in claim I wherein said sheath means comprises a resuscitation apparatus adapted to encompass the upper torso of a human body for application thereto of such pressure to effect cardio-pulmonary resuscitation.

15. An apparatus for enclosing a selected body portion of a human body comprising:

an enclosing means which is adapted to confront the selected body portion:

seal means associated with said enclosing means and 35 operable to encompass a peripheral extent of the selected body portion and to sealingly engage said peripheral extent in a manner to define an enclosed space which extends adjacent the selected body portion and is enveloped by said enclosing means; 40

said enclosing means including a flexible portion which is adapted to be formed into a selected shape which closely conforms with at least a corresponding adjacent part of the selected body portion to provide a closely form-fitting enclosure which 45 envelopes said corresponding adjacent part of the body portion at essentially a minimum spacing therefrom;

tueans operable for selectively rigidifying said flexible portion in a manner that upon said selective rigidi- so fying said flexible portion is maintained in said selected shape; and

pressure medium connection means communicating with said enclosed space and adapted to be connected to a pressure medium source to provide 55 within said enclosed space pressure at variance from ambient atmospheric pressure for application to the selected body portion.

16. The apparatus as set forth in claim 15 wherein said flexible portion includes a flexible wall means defining a 60 scaled containment and a plurality of interengageable means disposed within said containment.

17. The apparatus as set forth in claim 16 wherein said means in rigidifying said flexible portion includes means for drawing a partial vacuum within said containment 65 to permit ambient air pressure acting on said flexible

wall means to move said interengageable means into mutual interengagement.

18. The apparatus as set forth in claim 17 additionally including adhesive means which is effective to maintain said interengageable means in mutual interengagement upon release of said partial vacuum within said containment.

19. The apparatus as set forth in claim 18 wherein said adhesive is a heat curing adhesive co-mingled with said interengageable means within said containment.

20. The apparatus as set forth in claim 18 wherein said adhesive means is a hot melt adhesive co-mingled with said interengageable means within said containment.

21. The apparatus as set forth in claim 18 wherein said interengageable means and said adhesive means are common integral units comprised of a plurality of discreet particles of adhesive.

22. The apparatus as set forth in claim 17 wherein said interengageable means includes a plurality of solid particles.

23. The apparatus as set forth in claim 22 wherein said solid particles are of a size that they collectively exhibit the character of a volume of powder.

24. The apparatus as set forth in claim 22 wherein said solid particles are of a size that they collectively exhibit the character of a volume of granulated matter.

25. The apparatus as set forth in claim 22 wherein said solid particles are of a size that they collectively exhibit the character of a mass of discreet beads of matter.

26. The apparatus as set forth in claim 22 wherein said plurality of solid particles includes a plurality of discreet styrofoam particles or layers of material.

27. An apparatus for enclosing a selected body portion of a human body comprising:

an enclosing means which is adapted to confront the body portion;

which is adapted to be formed into closely conforming relation with respect to at least a corresponding adjacent part of the body portion;

first rigidifying means selectively operable to temporarily rigidify said flexible portion to maintain said closely conforming relation of said flexible portions with said corresponding adjacent part of the body portion; and

second rigidifying means operable to maintain the rigidity of said flexible portion in said closely conforming relation with said corresponding adjacent part of the body portion after release of said first rigidifying means.

28. The apparatus as set forth in claim 27 wherein said flexible portion includes a flexible wall means defining a scaled containment and a plurality of interengageable means disposed within said containment.

29. The apparatus as set forth in claim 28 wherein said first rigidifying means includes means for drawing a partial vacuum within said containment to permit ambient air pressure acting on said flexible wall means to move said interengageable means into mutual interengagement.

30. The apparatus as set forth in claim 29 wherein said second rigidifying means includes adhesive means which is effective to maintain said interengageable means in said mutual interengagement upon telease of said partial vacuum within said containment.

## UNITED STATES PATENT AND TRADEMARK OFFICE CERTIFICATE OF CORRECTION

PATENT NO. :

5,222,478

DATED

June 29, 1993

INVENTOR(5): Eugene N. Scarberry, Patrick M. Handke

It is certified that error appears in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

In claim 5 (column 10, line 50) delete "the."

In claim 17 (column 11, line 64) delete "in" and substitute -- for --.

Signed and Sealed this

Nineteenth Day of March, 1996

Auest:

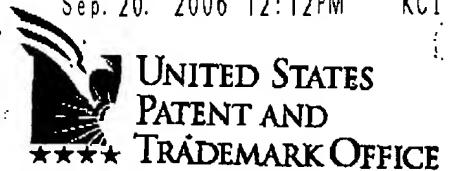
BRUCE LEHMAN

Attesting Officer

Commissioner of Perens and Trademarks

MANUFACTURING LEGAL DEPARTMENT

SAN ANTONIO, TX 78265-9508



KINETIC CONCEPTS, INC.

received

MAY 22, 2003

NADEEM G. BRIDI

P.O. BOX 659508

PTAS

Under Secretary of Commerce For Intellectual Property and Director of the United States Patent and Trademark Office Washington, DC 20231 www.uspto.gov



UNITED STATES PATENT AND TRADEMARK OFFICE NOTICE OF NON-RECORDATION OF DOCUMENT

DOCUMENT ID NO.: 102345317

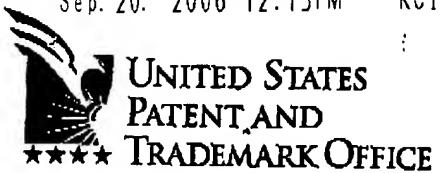
THE ENCLOSED DOCUMENT HAS BEEN EXAMINED AND FOUND NON-RECORDABLE BY THE ASSIGNMENT DIVISION OF THE U.S. PATENT AND TRADEMARK OFFICE. THE REASON(S) FOR NON-RECORDATION ARE STATED BELOW. DOCUMENTS BEING RESUBMITTED FOR RECORDATION MUST BE ACCOMPANIED BY A NEW COVER SHEET REFLECTING THE CORRECT INFORMATION TO BE RECORDED AND THE DOCUMENT ID NUMBER REFERENCED ABOVE.

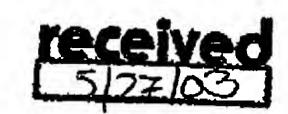
THE ORIGINAL DATE OF FILING OF THIS ASSIGNMENT DOCUMENT WILL BE MAINTAINED IF RESUBMITTED WITH THE APPROPRIATE CORRECTION(S) WITHIN 30 DAYS FROM THE DATE OF THIS NOTICE AS OUTLINED UNDER 37 CFR 3.51. THE RESUBMITTED DOCUMENT MUST INCLUDE A STAMP WITH THE OFFICIAL DATE OF RECEIPT UNDER 37 CFR 3. APPLICANTS MAY USE THE CERTIFIED PROCEDURES UNDER 37 CFR 1.8 OR 1.10 FOR RESUBMISSION OF THE RETURNED PAPERS, IF THEY DESIRE TO HAVE THE BENEFIT OF THE DATE OF DEPOSIT IN THE UNITED STATES POSTAL SERVICE.

SEND DOCUMENTS TO: U.S. PATENT AND TRADEMARK OFFICE, ASSIGNMENT DIVISION, BOX ASSIGNMENTS, CG-4, 1213 JEFFERSON DAVIS HWY, SUITE 320, WASHINGTON, D.C. 20231. IF YOU HAVE ANY QUESTIONS REGARDING THIS NOTICE, YOU MAY CONTACT THE INDIVIDUAL WHOSE NAME APPEARS ON THIS NOTICE AT 703-308-9723.

1. THE COVER SHEET SUBMITTED FOR RECORDING IS NOT ACCEPTABLE. THE PERSON SUBMITTING THE DOCUMENT MUST SIGN AND DATE THE DOCUMENT.

ANTIONE ROYALL, EXAMINER ASSIGNMENT DIVISION OFFICE OF PUBLIC RECORDS





MAY 22, 2003

**PTAS** 

Under Secretary of Commerce For Intellectual Property and Director of the United States Patent and Trademark Office Washington, DC 20231 www.uspto.gov

KINETIC CONCEPTS, INC.
NADEEM G. BRIDI
MANUFACTURING LEGAL DEPT.
P.O. BOX 659508
SAN ANTONIO, TX 78265-9508



UNITED STATES PATENT AND TRADEMARK OFFICE NOTICE OF RECORDATION OF ASSIGNMENT DOCUMENT

THE ENCLOSED DOCUMENT HAS BEEN RECORDED BY THE ASSIGNMENT DIVISION OF THE U.S. PATENT AND TRADEMARK OFFICE. A COMPLETE MICROFILM COPY IS AVAILABLE AT THE ASSIGNMENT SEARCH ROOM ON THE REEL AND FRAME NUMBER REFERENCED BELOW.

PLEASE REVIEW ALL INFORMATION CONTAINED ON THIS NOTICE. THE INFORMATION CONTAINED ON THIS RECORDATION NOTICE REFLECTS THE DATA PRESENT IN THE PATENT AND TRADEMARK ASSIGNMENT SYSTEM. IF YOU SHOULD FIND ANY ERRORS OR HAVE QUESTIONS CONCERNING THIS NOTICE, YOU MAY CONTACT THE EMPLOYEE WHOSE NAME APPEARS ON THIS NOTICE AT 703-308-9723. PLEASE SEND REQUEST FOR CORRECTION TO: U.S. PATENT AND TRADEMARK OFFICE, ASSIGNMENT DIVISION, BOX ASSIGNMENTS, CG-4, 1213 JEFFERSON DAVIS HWY, SUITE 320, WASHINGTON, D.C. 20231.

RECORDATION DATE: 01/13/2003

REEL/FRAME: 013673/0415

NUMBER OF PAGES: 2

BRIEF: ASSIGNMENT OF ASSIGNOR'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:

KINETIC CONCEPTS, INC.

DOC DATE: 06/03/2002

ASSIGNEE:

KCI LICENSING, INC. P.O. BOX 659508 SAN ANTONIO, TEXAS 78265-9508

SERIAL NUMBER: 09458280

PATENT NUMBER:

FILING DATE: 12/10/1999

ISSUE DATE:

PAULA MCCRAY, EXAMINER ASSIGNMENT DIVISION OFFICE OF PUBLIC RECORDS

VAC. 331A. 45

01-23-2003

| OMB No 0651-0027 (over \$120,0005)                                                                                                                                                                                                                                                   | U.S. DEPARTMENT OF COMMER<br>U.S. Patent and Trademark C                                                                                                                            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                                      | narks: Please record the attached original documents or copy thereof.                                                                                                               |
| Name of conveying party(ies):     Kinetic Concepts, Inc.                                                                                                                                                                                                                             | 2. Name and address of receiving party(ies) Name: _KCl Licensing, Inc                                                                                                               |
|                                                                                                                                                                                                                                                                                      | Internal Address:                                                                                                                                                                   |
| Additional name(s) of conveying party(les) attached? Yes                                                                                                                                                                                                                             | No 1-21-03                                                                                                                                                                          |
| 3. Nature of conveyance:                                                                                                                                                                                                                                                             |                                                                                                                                                                                     |
| Assignment Merger  Security Agreement Change of Nam                                                                                                                                                                                                                                  | Street Address: P.O. Box 659508                                                                                                                                                     |
| Other                                                                                                                                                                                                                                                                                |                                                                                                                                                                                     |
| Execution Date:                                                                                                                                                                                                                                                                      | City: San Antonio State: TX Zip: 78265-950                                                                                                                                          |
| 4. Application number(s) or patent number(s):                                                                                                                                                                                                                                        | Additional name(s) & address(es) attached? Yes V                                                                                                                                    |
| #                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                     |
| <ol><li>Name and address of party to whom correspondent<br/>concerning document should be mailed;</li></ol>                                                                                                                                                                          | re attached? Yes No ce , 6. Total number of applications and patents involved:                                                                                                      |
| 5. Name and address of party to whom correspondent                                                                                                                                                                                                                                   | re attached? Yes No  ce . 6. Total number of applications and patents involved:  7. Total fee (37 CFR 3.41)                                                                         |
| <ol> <li>Name and address of party to whom correspondent<br/>concerning document should be mailed;</li> <li>Name: Nadeem G. Bridi</li> </ol>                                                                                                                                         | ce . 6. Total number of applications and patents involved:                                                                                                                          |
| <ol><li>Name and address of party to whom correspondent<br/>concerning document should be mailed;</li></ol>                                                                                                                                                                          | 7. Total fee (37 CFR 3.41)                                                                                                                                                          |
| 5. Name and address of party to whom correspondent concerning document should be mailed:  Name: Nadeem G. Bridi  Kinetic Concepts, Inc.                                                                                                                                              | 7. Total fee (37 CFR 3.41)                                                                                                                                                          |
| 5. Name and address of party to whom correspondent concerning document should be mailed:  Name: Nadeem G. Bridi  Kinetic Concepts, Inc.  Internal Address: Manufacturing Legal Department                                                                                            | 7. Total fee (37 CFR 3.41)                                                                                                                                                          |
| 5. Name and address of party to whom correspondent concerning document should be mailed:  Name: Nadeem G. Bridi  Internal Address: Kinetic Concepts, Inc.  Manufacturing Legal Department  Street Address: P.O. Box 659508  City: San Antonio State: TX Zip: 78265-9508  DO NOT Us   | 6. Total number of applications and patents involved:  7. Total fee (37 CFR 3.41)\$40.00  Enclosed  Authorized to be charged to deposit account  8. Deposit account number:  500326 |
| 5. Name and address of party to whom correspondent concerning document should be mailed:  Name: Nadeem G. Bridi  Internal Address: Kinetic Concepts, Inc.  Manufacturing Legal Department  Street Address: P.O. Box 659508  City: San Antonio State: TX Zip: 78265-9508              | 6. Total number of applications and patents involved:  7. Total fee (37 CFR 3.41)                                                                                                   |
| 5. Name and address of party to whom correspondent concerning document should be mailed:  Name: Nadeem G. Bridi  Internal Address: Kinetic Concepts, Inc.  Manufacturing Legal Department  Street Address: P.O. Box 659508  City: San Antonio State: TX Zip: 78265-9508  DO NOT Us   | 6. Total number of applications and patents involved:  7. Total fee (37 CFR 3.41)                                                                                                   |
| 5. Name and address of party to whom correspondent concerning document should be mailed:  Name: Nadeem G. Bridi  Internal Address: Kinetic Concepts, Inc.  Manufacturing Legal Department  Street Address: P.O. Box 659508  City: San Antonio State: TX Zip: 78265-9508  DO NOT Use. | 7. Total fee (37 CFR 3.41)                                                                                                                                                          |

## PATENT ASSIGNMENT From Kinetic Concepts, Inc. to KCI Licensing, Inc.

WHEREAS, Kinetic Concepts, Inc. ("Assignor"), a Texas corporation having a principal place of business at 8023 Vantage Drive, San Antonio, Texas 78230, is the owner of U.S. Patent Application No. 09/458,280 for a "Therapeutic Apparatus for Treating Ulcers" (hereinafter "the Patent Application"); and

WHEREAS, KCI Licensing, Inc., a corporation organized under the laws of the State of Delaware, whose address is P.O. Box 659508, San Antonio, Texas 78265-9508 ("Assignee"), is desirous of obtaining the entire right, title and interest in the Patent Application;

NOW THEREFORE, Assignor hereby sells, transfers, conveys and assigns to Assignee the entire right, title and interest in and to the Patent, including all rights to recover for past and/or future infringement, misappropriation, or the like of any and all of said Patent Application, and any continuations, divisionals, continuations-in-part, and international applications that proceed therefrom;

IN TESTIMONY WHEREOF, Assignor hereunto sets its hand and seal this 3 day of wee, 2002.

ASSIGNOR: KINETIC CONCEPTS, INC.

Name: John H. Vrzalik

Title: Vice President Research

STATE OF TEXAS

8 69 69

COUNTY OF BEXAR

Before me, the undersigned authority, on this day personally appeared <u>lotted</u>, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he executed the same for the purposes and consideration therein expressed, and as the act and deed of said Assignor.

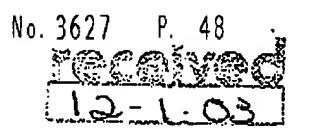
Given under my hand and seal of office on this 3 th day of gence, 2002.

PATRICIA ABDEL-TAWAB
MY COMMISSION EXPIRES
February 19, 2006

Notary Public in and for the

State of Texas

My Commissioner Expires: 2/19/06





### UNITED STATES PATENT AND TRADEMARK OFFICE

Under Secretary of Commerce for Intellectual Property and Director of the United States Patent and Trademark Office

NOVEMBER 24, 2003

PTAS

KINETIC CONCEPTS, INC.
NADEEM G. BRIDI
MANUFACTURING LEGAL DEPARTMENT
P.O. BOX 659508
SAN ANTONIO, TEXAS 78265-9508



UNITED STATES PATENT AND TRADEMARK OFFICE NOTICE OF RECORDATION OF ASSIGNMENT DOCUMENT

THE ENCLOSED DOCUMENT HAS BEEN RECORDED BY THE ASSIGNMENT DIVISION OF THE U.S. PATENT AND TRADEMARK OFFICE. A COMPLETE MICROFILM COPY IS AVAILABLE AT THE ASSIGNMENT SEARCH ROOM ON THE REEL AND FRAME NUMBER REFERENCED BELOW.

PLEASE REVIEW "ALL INFORMATION CONTAINED ON THIS NOTICE. THE INFORMATION CONTAINED ON THIS RECORDATION NOTICE REFLECTS THE DATA PRESENT IN THE PATENT AND TRADEMARK ASSIGNMENT SYSTEM. IF YOU SHOULD FIND ANY ERRORS OR HAVE QUESTIONS CONCERNING THIS NOTICE, YOU MAY CONTACT THE EMPLOYEE WHOSE NAME APPEARS ON THIS NOTICE AT 703-308-9723. PLEASE SEND REQUEST FOR CORRECTION TO: U.S. PATENT AND TRADEMARK OFFICE, ASSIGNMENT DIVISION, BOX ASSIGNMENTS, CG-4, 1213 JEFFERSON DAVIS HWY, SUITE 320, WASHINGTON, D.C. 20231.

RECORDATION DATE: 01/21/2003

REEL/FRAME: 014148/0437

NUMBER OF PAGES: 5

BRIEF: ASSIGNMENT OF ASSIGNOR'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:

VOGEL, RICHARD C.

DOC DATE: 07/30/1997

ASSIGNOR:

TUMEY, DAVID M.

DOC DATE: 07/29/1997

ASSIGNOR:

MORRIS, SUSAN P.

DOC DATE: 07/29/1997

ASSIGNOR:

RANDOLPH, L. TAB

DOC DATE: 07/29/1997

ASSIGNEE:

KINETIC CONCEPTS, INC.

P.O. BOX 659508

SAN ANTONIO, TEXAS 78265-9508

SERIAL NUMBER: 09458280

FILING DATE: 12/10/1999

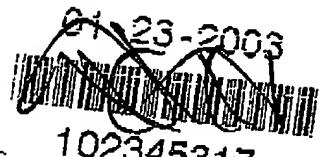
DOCKET DATE: VAC. 331A.US DOCKET FOR: PATENT NUMBER:

ISSUE DATE:

014148/0437 PAGE 2

ALLYSON PURNELL, EXAMINER ASSIGNMENT DIVISION OFFICE OF PUBLIC RECORDS

| Mrs.                                                                                   | 6.1063                                                |
|----------------------------------------------------------------------------------------|-------------------------------------------------------|
| Form PTO-1595 06 - 12 -                                                                | 2003 U.S. DEPARTMENT OF COMMERCE                      |
| (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005)                                        | U.S. Patent and Trademark Office                      |
| OMB No. 0651-0027 (exp. 6/30/2005)  Tab settings ⇔ ⇔ ▼                                 |                                                       |
| To the Honorable Commission 102471                                                     | 624 ched criginal documents or copy thereof.          |
| Name of conveying party(ies):                                                          | 2. Name and address of receiving party(les)           |
| Richard C. Vogel  David M. Tumey                                                       | Name: Kinetic Concepts, Inc.                          |
| Susan P. Morris                                                                        | Internal Address:                                     |
| L. Tab Randolph                                                                        | 7103                                                  |
| Additional name(s) of conveying party(ies) attached? Yes No. No. Nature of conveyance: |                                                       |
|                                                                                        |                                                       |
|                                                                                        | Street Address: P.O. Box 659508                       |
| Security Agreement Change of Name                                                      | - Total Cost.                                         |
| Other                                                                                  |                                                       |
|                                                                                        | City: San Antonio State: TX Zip: 78265-9508           |
| Execution Date: 07/29/1997                                                             |                                                       |
| 4. Application number(s) or patent number(s):                                          | Additional name(s) & address(es) attached?Yes         |
| If this document is being filed together with a new appl                               | ication the execution data aftire and the same        |
| A. Patent Application No.(s) 09/458,280                                                |                                                       |
|                                                                                        | B. Patent No.(s)                                      |
| Additional numbers at                                                                  | tached? Yes No                                        |
| 5. Name and address of party to whom correspondence                                    | 6. Total number of applications and patents involved: |
| concerning document should be mailed:                                                  | 4thruss 1                                             |
| Name: Nadeem G. Bridi                                                                  | 7. Total fee (37 CFR 3.41)\$40.00                     |
| Internal Address: Kinetic Concepts, Inc.                                               | Enclosed                                              |
| Manufacturing Legal Department                                                         | Authorized to be charged to deposit account           |
|                                                                                        | (J)                                                   |
|                                                                                        | 8. Deposit account number:                            |
| Street Address: P.O. Box 659508                                                        | F00206                                                |
|                                                                                        | 500326                                                |
| City: San Antonio State: TX Zip: 78265-9508                                            |                                                       |
| CityState:Zip:/OL00-0006                                                               |                                                       |
| DO NOT USE                                                                             | THIS SPACE                                            |
| 9. Signature,                                                                          |                                                       |
| مرجسر                                                                                  |                                                       |
| Nadeem G. Bridi                                                                        | May 30, 2003                                          |
| Name of Person Signing                                                                 | Signature Date                                        |
| Total number of pages including cover:  Mail documents to be recorded with many pages. | sheet, attachments, and documents:                    |



| Farm PTO-1595 RECORD                                                                      | 02345317  3. DEPARTMENT OF COMMERCE U.S. Patent and Tradamark Office |
|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| UNIB No. 0651-0027 (exp. 6/30/2005)                                                       | TS ONLY  U.S. Patent and Tradamark Office                            |
| Tab settings ⇒ ⇒ ▼  To the Honorable Commissioner of Returns and Trade-ont                |                                                                      |
| Name of conveying party(ies):                                                             | s: Please record the attached original documents or copy thereof.    |
| Richard C. Vonel                                                                          | 2. Name and address of receiving party(ies)                          |
| David M. Turney (-2/-03                                                                   | Name: Kinetic Concepts, Inc.                                         |
| Susan P. Morris<br>L. Tab Randolph                                                        | Internal Address:                                                    |
| Additional name(s) of conveying party(ies) attached? Yes W No                             |                                                                      |
| 3. Nature of conveyance:                                                                  | •                                                                    |
| Assignment Merger                                                                         | Street Address: P.O. Box 659508                                      |
| Security Agreement Change of Name                                                         | Oliest Address.                                                      |
| Other                                                                                     |                                                                      |
| _ 07/29/1997                                                                              | City: San Antonio state: TX Zip: 78265-9508                          |
| Execution Date:                                                                           | Additional name(s) & address(es) attached? Yes Vo                    |
| 4. Application number(s) or patent number(s):                                             |                                                                      |
| If this document is being filed together with a new appl                                  | ication, the execution date of the application is:                   |
| A. Patent Application No.(s) 09/458,280                                                   | B. Patent No.(s)                                                     |
| **************************************                                                    |                                                                      |
|                                                                                           | tached? Yes V No                                                     |
| 5. Name and address of party to whom correspondence concerning document should be mailed: | 6. Total number of applications and patents involved:                |
| Name: Nadeem G. Bridi                                                                     | 7. Total fee (37 CFR 3.41)\$40.00                                    |
| Internal Address: Kinetic Concepts, Inc.                                                  | Enclosed                                                             |
| Manufacturing Legal Department                                                            | Authorized to be charged to deposit account                          |
|                                                                                           | 8. Deposit account number:                                           |
| Street Address: P.O. Box 659508                                                           |                                                                      |
|                                                                                           | 500326 S S                                                           |
| City: San Antonio State: TX Zip: 78265-9508                                               |                                                                      |
|                                                                                           |                                                                      |
| DO NOT USE 09458980                                                                       | THIS SPACE 之 完                                                       |
| 40.00 CH                                                                                  |                                                                      |
| Nadsom G. Bridi                                                                           | January 13, 2003                                                     |
| Name of Person Signing                                                                    | Signature Date                                                       |
| Total number of pages including cover:                                                    | sheet, attachments, and documents: 2                                 |

Commissioner of Patenta & Trademarks, Box Assignments

#### **ASSIGNMENT**

WHEREAS, I, Richard C. Vogel, a citizen of the United States, residing at 15614 Mission Crest San Antonio, Texas 78232, (hereinafter referred to as the "Assignor") am an original joint inventor of a certain new and useful THERAPEUTIC METHOD AND APPARATUS FOR TREATING ULCERS for which I have executed an application for Letters Patent of the United States, of even date herewith; and

WHEREAS, Kinetic Concepts, Inc., a corporation organized under the laws of the State of Texas, whose address is P.O. Box 659508, San Antonio, Texas 78265-9508, ("Assignee") is desirous of obtaining the entire right, title and interest in, to and under the said improvements and the said application;

NOW, THEREFORE, in consideration of the sum of One Dollar (\$1.00) to me in hand paid, and other good and valuable consideration, the receipt of which is hereby acknowledged, I, the said Assignor, have sold, assigned, transferred and set over, and by these presents, do hereby sell, assign, transfer and set over, unto the said Assignee, its successors, legal representatives and assigns, my entire right, title and interest in, to and under the said improvements, and the said application and all divisions, renewals and continuations thereof, and all Letters Patent of the United States which may be granted thereon and all reissues and extensions thereof, and all applications for Letters Patent which may hereafter be filed for said improvements in any country or countries foreign to the United States and all extensions, renewals and reissues thereof; and I hereby authorize and request the Commissioner of Patents of the United States, and any Official of any country or countries foreign to the United States, whose duty it is to issue patents on applications as aforesaid, to issue all Letters Patent for said improvements to the said Assignee, its successors, legal representatives and assigns, in accordance with the terms of this instrument.

AND, I hereby covenant that I have full right to convey the entire interest herein assigned, and that I have not executed, and will not execute, any agreement in conflict herewith.

AND, I hereby further covenant and agree that I will communicate to the said Assignee, its successors, legal representatives and assigns, any facts known to me respecting said improvements, and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths, and generally do everything possible to aid the said Assignee, its successors, legal representatives and assigns, to obtain and enforce proper patent and similar protection for said improvements in all countries.

IN TESTIMONY WHEREOF, I hereunto set my hand and seal this 30 T day of 1997.

Richard C. Vogel

STATE OF TEXAS

8

COUNTY OF BEXAR

8

On this 30 day of July, 1997, before me, a Notary Public in and for the State and County aforesaid, personally appeared RICHARD C. VOGEL, to me known and known to me to be the person of that name, who signed and sealed the foregoing instrument, and he acknowledged the same to be his free act and deed.

Notary Public in and for the State of Texas

DEBORAH D. BERFG G. G. NOTARY PUBLIC State of Texas
Comm. Exp. 01-22-2000

#### <u>ASSIGNMENT</u>

WHEREAS, I, David M. Tumey, a citizen of the United States, residing at 5018 Newcastle San Antonio, Texas 78249, (hereinaster referred to as the "Assignor") am an original joint inventor of a certain new and useful THERAPEUTIC METHOD AND APPARATUS FOR TREATING ULCERS for which I have executed an application for Letters Patent of the United States, of even date herewith; and

WHEREAS, Kinetic Concepts, Inc., a corporation organized under the laws of the State of Texas, whose address is P.O. Box 659508, San Antonio, Texas 78265-9508, ("Assignee") is desirous of obtaining the entire right, title and interest in, to and under the said improvements and the said application;

NOW, THEREFORE, in consideration of the sum of One Dollar (\$1.00) to me in hand paid, and other good and valuable consideration, the receipt of which is hereby acknowledged, I, the said Assignor, have sold, assigned, transferred and set over, and by these presents, do hereby sell, assign, transfer and set over, unto the said Assignee, its successors, legal representatives and assigns, my entire right, title and interest in, to and under the said improvements, and the said application and all divisions, renewals and continuations thereof, and all Letters Patent of the United States which may be granted thereon and all reissues and extensions thereof, and all applications for Letters Patent which may hereafter be filed for said improvements in any country or countries foreign to the United States and all extensions, renewals and reissues thereof; and I hereby authorize and request the Commissioner of Patents of the United States, and any Official of any country or countries foreign to the United States, whose duty it is to issue patents on applications as aforesaid, to issue all Letters Patent for said improvements to the said Assignee, its successors, legal representatives and assigns, in accordance with the terms of this instrument.

AND, I hereby covenant that I have full right to convey the entire interest herein assigned, and that I have not executed, and will not execute, any agreement in conflict herewith.

AND, I hereby further covenant and agree that I will communicate to the said Assignee, its successors, legal representatives and assigns, any facts known to me respecting said improvements, and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths, and generally do everything possible to aid the said Assignee, its successors, legal representatives and assigns, to obtain and enforce proper patent and similar protection for said improvements in all countries.

IN TESTIMONY WHEREOF, I hereunto set my hand and sealthis day of July, 1997.

David M. Tumey

STATE OF TEXAS

COUNTY OF BEXAR

On this <u>af</u> day of July, 1997, before me, a Notary Public in and for the State and County aforesaid, personally appeared DAVID M. TUMEY, to me known and known to me to be the person of that name, who signed and sealed the foregoing instrument, and he acknowledged the same to be his free act and deed.

Notary Public in and for the State of Texas

DEBORAH D. BERPOTH NOTARY PUBLIC State of Texas Comm. Exp. 01-22-2000

#### **ASSIGNMENT**

WHEREAS, I, Susan P. Morris, a citizen of the United States, residing at 2910 Oak Fall San Antonio, Texas 78231, (Hereinafter referred to as the "Assignor") am an original joint inventor of a certain new and useful THERAPEUTIC METHOD AND APPARATUS FOR TREATING ULCERS for which I have executed an application for Letters Patent of the United States, of even date herewith; and

WHEREAS, Kinetic Concepts, Inc., a corporation organized under the laws of the State of Texas, whose address is P.O. Box 659508, San Antonio, Texas 78265-9508, ("Assignee") is desirous of obtaining the entire right, title and interest in, to and under the said improvements and the said application;

NOW, THEREFORE, in consideration of the sum of One Dollar (\$1.00) to me in hand paid, and other good and valuable consideration, the receipt of which is hereby acknowledged, I, the said Assignor, have sold, assigned, transferred and set over, and by these presents, do hereby sell, assign, transfer and set over, unto the said Assignee, its successors, legal representatives and assigns, my entire right, title and interest in, to and under the said improvements, and the said application and all divisions, renewals and continuations thereof, and all Letters Patent of the United States which may be granted thereon and all reissues and extensions thereof, and all applications for Letters Patent which may hereafter be filed for said improvements in any country or countries foreign to the United States and all extensions, renewals and reissues thereof; and I hereby authorize and request the Commissioner of Patents of the United States, and any Official of any country or countries foreign to the United States, whose duty it is to issue patents on applications as aforesaid, to issue all Letters Patent for said improvements to the said Assignee, its successors, legal representatives and assigns, in accordance with the terms of this instrument.

AND, I hereby covenant that I have full right to convey the entire interest herein assigned, and that I have not executed, and will not execute, any agreement in conflict herewith.

AND, I hereby further covenant and agree that I will communicate to the said Assignee, its successors, legal representatives and assigns, any facts known to me respecting said improvements, and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths, and generally do everything possible to aid the said Assignee, its successors, legal representatives and assigns, to obtain and enforce proper patent and similar protection for said improvements in all countries.

IN TESTIMONY WHEREOF, I hereunto set my hand and seal this 24 day of July, 1997.

Susan P. Morris

STATE OF TEXAS

COUNTY OF BEXAR .

On this 21 day of July, 1997, before me, a Notary Public in and for the State and County aforesaid, personally appeared SUSAN P. MORRIS, to me known and known to me to be the person of that name, who signed and sealed the foregoing instrument, and he acknowledged the same to be his free act and deed.

Notary Public in and for the State of Texas

#### **ASSIGNMENT**

BONN LTR 1/29/97

WHEREAS, I, L. Tab Randolpk, a citizen of the United States, residing at 27917 From Mountain San Antonio, Texas 78260, (Hereinafter referred to as the "Assignor") am an original joint inventor of a certain new and useful THERAPEUTIC METHOD AND APPARATUS FOR TREATING ULCERS for which I have executed an application for Letters Patent of the United States, of even date herewith; and

WHEREAS, Kinetic Concepts; Inc., a corporation organized under the laws of the State of Texas, whose address is P.O. Box 659508, San Antonio, Texas 78265-9508, ("Assignee") is desirous of obtaining the entire right, title and interest in, to and under the said improvements and the said application;

NOW, THEREFORE, in consideration of the sum of One Dollar (\$1.00) to me in hand paid, and other good and valuable consideration, the receipt of which is hereby acknowledged. I, the said Assignor, have sold, assigned, transferred and set over, and by these presents, do hereby sell, assign, transfer and set over, unto the said Assignee, its successors, legal representatives and assigns, my entire right, title and interest in, to and under the said improvements, and the said application and all divisions, renewals and continuations thereof, and all Letters Patent of the United States which may be granted thereon and all reissues and extensions thereof, and all applications for Letters Patent which may hereafter be filed for said improvements in any country or countries foreign to the United States and all extensions, renewals and reissues thereof; and I hereby authorize and request the Commissioner of Patents of the United States, and any Official of any country or countries foreign to the United States, whose duty it is to issue patents on applications as aforesaid, to issue all Letters Patent for said improvements to the said Assignee, its successors, legal representatives and assigns, in accordance with the terms of this instrument.

AND, I hereby covenant that I have full right to convey the entire interest herein assigned, and that I have not executed, and will not execute, any agreement in conflict herewith.

AND, I hereby further covenant and agree that I will communicate to the said Assignee, its successors, legal representatives and assigns, any facts known to me respecting said improvements, and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths, and generally do everything possible to aid the said Assignee, its successors, legal representatives and assigns, to obtain and enforce proper patent and similar protection for said improvements in all countries.

IN TESTIMONY WHEREOF, I hereunto set my hand and seal this 24 day of July, 1997.

STATE OF TEXAS

COUNTY OF BEXAR

On this <u>May</u> day of July, 1997, before me, a Notary Public in and for the State and County aforesaid, personally appeared L. TAB RANDOLPH, to me known and known to me to be the person of that name, who signed and sealed the foregoing instrument, and he acknowledged the same to be his free act and deed.

Notary Public in and for the State of Texas

DEBORAH D. BERROTH
NOTARY PUBLIC
State of Texas

(Rel.56-5/93 Pab.605)

FORM 16-7

16-37

PATENT

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

ssignments Recordation Services Director of the US tatenty Trademand P.D. Box 1450, Alexandria, VA RESUBMISSION OF ASSIGNMENT (DOCUMENT) PAPERS REFUSED 2313-1450

NOTE: "The date of recording of a document is the date the document meeting the requirements for recording set forth in this part is filed in the Office. A document which does not comply with the identification requirements of § 3.21 will not be recorded. Documents not meeting the other requirements for recording, for example, a document submitted without a completed cover sheet or without the required fee, will be returned for correction to the sender where a correspondence address is available. The returned papers, stamped with the original date of receipt by the Office, will be accompanied by a letter which will indicate that if the returned papers are corrected and resubmitted to the Office within the time specified in the letter, the Office will consider the original date of filing of the papers as the date of recording of the document. The certification procedure under either § 1.8 or § 1.10 of this chapter may be used for resubmissions of returned papers to have the benefit of the date of deposit in the United States Postal Service. If the returned papers are not corrected and resubmitted within the specified period, the date of filing of the corrected papers will be considered to be the date of recording of the document. The specified period to resubmit the returned papers will not be extended." 37 CFR 3.51.

FOR RECORDAL (37 CFR 3.51)

"If a document to be recorded is not accompanied by a completed cover sheet, the document and any incomplete cover sheet will be returned pursuant to § 3.51 for proper completion of a cover sheet and resubmission of the document and a completed cover sheet." 37 CFR 3.28.

#### CERTIFICATE OF MAILING (37 CFR 1.8(a))

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited on the date shown below with the United States Postal Service in an envelope addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231.

(check and complete appropriate item below):

| X | 37 CFR 1.8(a) with sufficient postage as first class mail | or □ as "Express Mail Po<br>to Addressee" I<br>No | st Office |
|---|-----------------------------------------------------------|---------------------------------------------------|-----------|
|   | •                                                         | Nadeem G. Bridi                                   |           |
|   | · lilados                                                 | (Type or print name of person mailing pa          | per)      |

PAGE 56/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

| do not comply with § 3.21                                | and was not recorded                                            |
|----------------------------------------------------------|-----------------------------------------------------------------|
| A copy of the PTO letter                                 | is attached                                                     |
| 2. The term for resubmission                             | of the papers set in the PTO letter expires                     |
|                                                          | June 22, 2003 ——————————————————————————————————                |
| NQTE: "The specified period to resubmit to added)        | he returned papers will not be extended."37 CFR 3.51 (emphasion |
| 3. Applicant resubmits the par                           | pers refused recordal:                                          |
| (check the                                               | appropriate box(es) below)                                      |
| □ with the necessary correct  □ with new appropriate pap | tions and/or omissions entered on the papers ers added          |
| 4. Recordal is now respectfully                          | requested.                                                      |
| Tel. No. (210) 255-4543                                  | Nadeem G. Bridi                                                 |
| Reg. No. 42,361                                          | Type or print name of attorney                                  |
|                                                          | P.O. Box 659508                                                 |
| <u>-</u>                                                 | P.O. Address<br>San Antonio, TX 78265-9508                      |
|                                                          |                                                                 |

(Resubmission of Assignment Papers Refusal For Recordal [16-7]—page 2 of 2)

(Rul\_56-5/93 Pub.605) FORM 16-7 16-38



## United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alternatia, Virginia 12313-1450
www.usptn.gov

| PPLICATION NO.                                   | PILING DATE      | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO.     | CONFIRMATION NO |
|--------------------------------------------------|------------------|----------------------|-------------------------|-----------------|
| 09/458,280                                       | 12/10/1999       | RICHARD C. VOGEL     | VAC.331                 | 8678            |
| 30159 759                                        |                  |                      | EXAM                    | INER            |
| ATTN: LEGAL-MANUFACTURING KINETIC CONCEPTS, INC. |                  | DEMILLE, I           | DANTON D                |                 |
| P.O. BOX 65950                                   | 08               |                      | ART UNIT                | PAPER NUMBER    |
| SAN ANTONIC                                      | ), TX 78265-9508 |                      | 3764                    |                 |
|                                                  |                  |                      | DATE MAILED: 11/24/2003 | <b>,</b>        |

Please find below and/or attached an Office communication concerning this application or proceeding.

received 12-1-03

1-24-04-2NO DOCKET DATE: 2-24-04-3NO

DOCKET FOR: FINAL (

DOCKET BY:

let Wolce of

PTO-90C (Rev. 10/03)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Application No.                                                                                                                                                                                                                           | Applicant(s)                                                                                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 09/458,280                                                                                                                                                                                                                                | VOGEL ET AL                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Office Action Summary                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Examiner                                                                                                                                                                                                                                  | Art Unit                                                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Danton DeMille                                                                                                                                                                                                                            | 3764                                                                                                                               |
| Period f                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | - The MAILING DATE of this communi<br>or Reply                                                                                                                                                                                                                                                                                                                                                                                                                                | cation appears on the cover sheet with                                                                                                                                                                                                    | h the correspondence address                                                                                                       |
| THE - External extern | MAILING DATE OF THIS COMMUNIC PASSONS of time may be available under the provisions of time may be available under the provisions of SIX (5) MONTHS from the mailing date of this common period for reply apecified above is less than thirty (30) period for reply is apecified above, the maximum statute to reply within the set or extended period for reply weekly reply received by the Office later than three months and patent term adjustment. See 37 CFR 1.704(b). | CATION. of 37 CFR 1.136(a). In no event, however, may a repunication. b) days, a reply within the statutory minimum of thirty lutery period will apply and will expire SIX (6) MONT will, by statute, cause the application to become ABA | ply be timely filed  (30) days will be considered timely.  HS from the mailing date of this communication.  NDONED 35 U.S.C. & 133 |
| Status                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                           |                                                                                                                                    |
| 1)[                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Responsive to communication(s) filed                                                                                                                                                                                                                                                                                                                                                                                                                                          | d on <u>08 Se<i>ptember</i> 2003</u> .                                                                                                                                                                                                    |                                                                                                                                    |
| <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ) ☐ This action is non-final.                                                                                                                                                                                                             |                                                                                                                                    |
| 3) 🔲                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Since this application is in condition for closed in accordance with the practic                                                                                                                                                                                                                                                                                                                                                                                              | or allowance except for formal matte<br>e under <i>Ex parte Quayle</i> , 1935 C.D.                                                                                                                                                        | rs, prosecution as to the merits is 11, 453 O.G. 213.                                                                              |
| Dispositi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | on of Claims                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                           |                                                                                                                                    |
| <b>4)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Claim(s) 1-17 is/are pending in the ap                                                                                                                                                                                                                                                                                                                                                                                                                                        | plication.                                                                                                                                                                                                                                |                                                                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 4a) Of the above claim(s) is/are                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                           |                                                                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Claim(s) is/are ellowed.                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                           |                                                                                                                                    |
| 6)⊠                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Claim(s) 1-17 is/are rejected.                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                           | •• ·                                                                                                                               |
| 7)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Claim(s) Is/are objected to.                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                           |                                                                                                                                    |
| 8)□                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Claim(s) are subject to restricti                                                                                                                                                                                                                                                                                                                                                                                                                                             | on and/or election requirement.                                                                                                                                                                                                           |                                                                                                                                    |
| pplication                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | on Papers                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                           |                                                                                                                                    |
| 9) 🔲 🗆                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | The specification is objected to by the                                                                                                                                                                                                                                                                                                                                                                                                                                       | Examiner.                                                                                                                                                                                                                                 |                                                                                                                                    |
| 10) 🔲 🧻                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | The drawing(s) filed on is/are;                                                                                                                                                                                                                                                                                                                                                                                                                                               | a) accepted or b) objected to by                                                                                                                                                                                                          | the Examiner.                                                                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Applicant may not request that any objecti                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                           |                                                                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Replacement drawing sheet(s) Including the                                                                                                                                                                                                                                                                                                                                                                                                                                    | ne correction is required if the drawing(s)                                                                                                                                                                                               | is objected to. See 37 CFR 1.121(d).                                                                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | The oath or declaration is objected to b                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                           | <del>-</del> -                                                                                                                     |
| riority u                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | nder 35 U.S.C. §§ 119 and 120                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                           |                                                                                                                                    |
| 12) a)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Acknowledgment is made of a claim for All b) Some * c) None of:                                                                                                                                                                                                                                                                                                                                                                                                               | or foreign priority under 35 U.S.C. § 1                                                                                                                                                                                                   | 119(a)-(d) or (f).                                                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Certified copies of the priority do                                                                                                                                                                                                                                                                                                                                                                                                                                           | ocuments have been received.                                                                                                                                                                                                              |                                                                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <ol> <li>Certified copies of the priority do</li> <li>Copies of the certified copies of</li> </ol>                                                                                                                                                                                                                                                                                                                                                                            | scuments have been received in App                                                                                                                                                                                                        | olication No.                                                                                                                      |
| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | application from the Internationa                                                                                                                                                                                                                                                                                                                                                                                                                                             | the priority documents have been re                                                                                                                                                                                                       | ceived in this National Stage                                                                                                      |
| * Se                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | e the attached detailed Office action i                                                                                                                                                                                                                                                                                                                                                                                                                                       | for a list of the certified copies not rec                                                                                                                                                                                                | ceived.                                                                                                                            |
| 13)∐ Ad<br>sin<br>37                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | knowledgment is made of a claim for<br>ce a specific reference was included in<br>CFR 1.78.                                                                                                                                                                                                                                                                                                                                                                                   | domestic priority under 35 U.S.C. § 1 n the first sentence of the specification                                                                                                                                                           | 119(e) (to a provisional application) on or in an Application Data Sheet.                                                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | The translation of the foreign langu                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                           |                                                                                                                                    |
| 4 <i>4</i> 1\[                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | knowledgment is made of a claim for a creater senter.                                                                                                                                                                                                                                                                                                                                                                                                                         | domestic priority under 35 U.S.C. §§ Ice of the specification or in an Appli                                                                                                                                                              | 120 and/or 121 since a specific cation Data Sheet. 37 CFR 1.78.                                                                    |
| 14)∏ Ac<br>refe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                           |                                                                                                                                    |
| 14)∏ Ac<br>refe<br>tachment(s                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                           |                                                                                                                                    |
| refe<br>achment(s<br>Notice o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | of References Cited (PTO-892)                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 4) 🔲 Interview Sum                                                                                                                                                                                                                        | mary (PTO-413) Paper No(s).                                                                                                        |
| referent(s  Notice                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ·<br>•)                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | -948) 5) Notice of Inform                                                                                                                                                                                                                 | mary (PTO-413) Paper No(s) mail Patent Application (PTO-152)                                                                       |

Office Action Summary

Application/Control Number: 09/458,280

Art Unit: 3764

Page 2

#### **DETAILED ACTION**

#### Claim Rejections - 35 USC § 103

Claims 1-5, 10-17 are rejected under 35 U.S.C. 103(a) as being unpatentable over Jacobs et al. in view of Argenta et al. and Dye.

As noted previously, Jacobs teaches an inflatable foot wrap for applying compressive force over the lower leg and foot of the patient.

Jacobs also teaches that the foot wrap can be used in combination with a wound dressing column 6, lines 4-7. In order to complete the teaching of Jacobs one needs to find a conventional wound dressing. Argenta teaches a conventional wound dressing that uses a porous foam pad 10 positioned within the ulcer, a drape 12 for covering and sealing the ulcer and fluid communication means 11, 15.

Jacobs appears silent with regard to exactly what is used to inflate the inflatable wrap. Jacobs teaches that the interface pressure may by regulated by the amount it is inflated but doesn't disclose how this is done. Dye teaches a conventional pump, reservoir and valves in which to supply pressure to inflation bladders. Dye teaches that the valves are closed while the compressor 32 charges the accumulator 30 with pressurized gas. Next the valve is opened to permit passage of pressurized fluid from the accumulator 30 into the ankle chamber, column 3, lines 28-39.

It would have been obvious to one of ordinary skill in the art to modify Jacobs to use a conventional wound dressing such as taught by Argenta in combination with the foot wrap as suggested by Jacobs and to use automatic positive pressure source as taught by Dye to

Application/Control Number: 09/458,280

Art Unit: 3764

Page 3

automatically regulate the pressure within the inflatable foot wrap. It appears that applicant has merely taken individual conventional elements and stuck them together.

Claims 6, 8, 9 are rejected under 35 U.S.C. 103(a) as being unpatentable over the references as applied to claim 1 above, and further in view of Tumey et al. 5,443,440. If one wishes to apply continuous pressure or intermittent pressure a controller and processor would have been an obvious provision. Tumey teaches a controller 44 and processor 70 for controlling the operation of the inflation. It would have been obvious to one of ordinary skill in the art to further modify Jacobs to provide a controller and processor as taught by Tumey to better control the operation of the device.

Claim 7 rejected under 35 U.S.C. 103(a) as being unpatentable over the references as applied to claim 6 above, and further in view of Khouri. Turney already teaches a pressure sensor 47 for regulating the inflation pressure. Regulating pressures of any kind whether it be positive or negative would be well within the realm of the artisan of ordinary skill. However, Khouri is additionally cited to teach the convention of a pressure sensor 24 in the vacuum environment and wound dressing figure 6. It would have been obvious to one of ordinary skill in the art to further modify Jacobs to include a pressure sensor as taught by Khouri to maintain proper pressure within the application site.

Claims 1-6, 8-17 are rejected under 35 U.S.C. 103(a) as being unpatentable over Jacobs et al. in view of Argenta et al. and Tumey et al. 5,840,049.

Tumey '049 alternatively teaches the compressor and reservoir system for maintaining pressure within the bladders. It would have been obvious to one of ordinary skill in the art to modify Jacobs to use a conventional vacuum wound dressing as taught by Argenta in

combination with the foot wrap as suggested by Jacobs and to use a positive pressure source including a compressor, reservoir and controller as taught by Tumey to better control the positive pressure application.

Claim 7 rejected under 35 U.S.C. 103(a) as being unpatentable over Jacobs et al.,

Argenta et al. and Tumey et al. '049 as applied to claim 6 above, and further in view of

Khouri. Tumey already teaches a pressure sensor 47 for regulating the inflation pressure.

Regulating pressures of any kind whether it be positive or negative would be well within the realm of the artisan of ordinary skill. However, Khouri is additionally cited to teach the convention of a pressure sensor 24 in the vacuum environment and wound dressing figure 6. It would have been obvious to one of ordinary skill in the art to further modify Jacobs to include a pressure sensor as taught by Khouri to maintain proper pressure within the application site.

#### Double Patenting

Claims 1-6, 8-17 are rejected under the judicially created doctrine of obviousnesstype double patenting as being unpatentable over claims 1-8 of U.S. Patent No. 5,840,049 in
view of Argenta et al. and Jacobs et al. Tumey teaches an inflatable foot wrap with a
compressor and reservoir as claimed and adding a wound dressing such as taught by Argenta
would have been an obvious provision if the injury to the leg requires a wound dressing. Jacobs
is additionally cited to teach that the combination of inflatable foot wrap and wound dressing is
old. It would have been obvious to one of ordinary skill in the art to modify Tumey to include a
vacuum wound dressing as taught by Argenta if the patent so requires and as further suggested
by Jacobs.

Claim 7 is rejected under the judicially created doctrine of obviousness-type double

Application/Control Number: 09/458,280

Art Unit: 3764

Page 5

patenting as being unpatentable over claims 1-8 of U.S. Patent No. 5,840,049 as set forth above and further in view of Khouri. Tumey already teaches a pressure sensor 47 for regulating the inflation pressure. Regulating pressures of any kind whether it be positive or negative would be well within the realm of the artisan of ordinary skill. However, Khouri is additionally cited to teach the convention of a pressure sensor 24 in the vacuum environment and wound dressing figure 6. It would have been obvious to one of ordinary skill in the art to further modify Tumey to include a vacuum pressure sensor as taught by Khouri to maintain proper pressure within the application site.

#### Response to Arguments

Applicant's arguments with respect to claims 1-17 have been considered but are most in view of the new ground(s) of rejection.

It is felt that the claims merely recite a combination of conventional elements. The inflatable foot wrap is not new. The vacuum wound dressing is not new. Even the newly claimed compressor and reservoir is not new. Applicant appears to be combining old elements together for a specific intended use. There is no unobviousness to combine these elements together since the prior art even suggests it.

#### Conclusion

Applicant's amendment necessitated the new ground(s) of rejection presented in this Office action. Accordingly, THIS ACTION IS MADE FINAL. See MPEP § 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO

Application/Control Number: 09/458,280

Art Unit: 3764

Page 6

MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the date of this final action.

ddd
20 November, 2003
(703) 308-3713
Fax: (703) 872-9306
danton.demille@uspto.gov

Danton DeMille Primary Examiner Art Unit 3764

|   | , •         | Notice of References Cited                       |                                       |                                       | Application/Control No.  09/458,280  Examiner  Danton DeMille |                                        | Applicant(s)/Patent Under Reexamination VOGEL ET AL.  Art Unit Page 1 of 1 |                                       |
|---|-------------|--------------------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------------------------------|----------------------------------------|----------------------------------------------------------------------------|---------------------------------------|
|   | _           |                                                  |                                       |                                       |                                                               |                                        |                                                                            |                                       |
|   | <del></del> |                                                  |                                       | U.S. PA                               | TENT DOCUMENTS                                                | 3                                      |                                                                            |                                       |
| * |             | Document Number<br>Country Code-Number-Kind Code | Date<br>MM-YYYY                       |                                       | 1                                                             | Name                                   |                                                                            | Classification                        |
|   | A           | US-5,840,049                                     | 11-1998                               | Tumey                                 | et al.                                                        |                                        |                                                                            | 601/149                               |
|   | В           | US-5,007,411                                     | 04-1991                               | Dye, Jo                               | hn F.                                                         |                                        |                                                                            | 601/151                               |
|   | С           | c US-5,645,081 07-1997 Arger                     |                                       |                                       | nta et al.                                                    |                                        |                                                                            | 602/42                                |
|   | D           | US-                                              |                                       |                                       |                                                               |                                        |                                                                            |                                       |
|   | E           | US-                                              |                                       |                                       |                                                               |                                        |                                                                            |                                       |
|   | F           | US-                                              |                                       |                                       |                                                               |                                        |                                                                            |                                       |
|   | Ģ           | US-                                              |                                       |                                       |                                                               |                                        |                                                                            | · · · · · · · · · · · · · · · · · · · |
|   | Н           | US-                                              |                                       |                                       |                                                               |                                        |                                                                            |                                       |
|   | ı           | US-                                              | · · · · · · · · · · · · · · · · · · · |                                       |                                                               | ······································ |                                                                            |                                       |
| ا | J           | US-                                              |                                       |                                       |                                                               | <u> </u>                               |                                                                            |                                       |
|   | К           | US-                                              |                                       |                                       |                                                               |                                        |                                                                            |                                       |
|   | L           | US-                                              |                                       |                                       |                                                               |                                        |                                                                            | ·                                     |
|   | М           | US-                                              |                                       |                                       | ,                                                             |                                        |                                                                            |                                       |
|   |             |                                                  | F                                     | OREIGN !                              | PATENT DOCUMEN                                                | TS                                     |                                                                            |                                       |
|   | Ī           | Document Number Country Code-Number-Kind Code    | Date<br>MM-YYYY                       | Co                                    | untry                                                         | Name                                   | •                                                                          | Classification                        |
|   | N           |                                                  |                                       | <b>.</b> .                            |                                                               |                                        |                                                                            |                                       |
| 1 | 0           |                                                  |                                       | •                                     |                                                               |                                        |                                                                            |                                       |
| 1 | Р           |                                                  |                                       |                                       |                                                               |                                        |                                                                            |                                       |
| 1 | a           |                                                  |                                       | · · · · · · · · · · · · · · · · · · · |                                                               |                                        |                                                                            |                                       |
| 1 | R           |                                                  |                                       | · · · · · ·                           |                                                               | ,                                      |                                                                            |                                       |
| 1 | s           |                                                  |                                       | <u> </u>                              |                                                               |                                        |                                                                            |                                       |
| † | Т           |                                                  |                                       |                                       |                                                               |                                        |                                                                            |                                       |
|   |             |                                                  | J                                     | NON-PAT                               | ENT DOCUMENTS                                                 |                                        |                                                                            |                                       |
| T |             | Include                                          | as applicable:                        | Author, Titi                          | e Date, Publisher, Ed                                         | iltion or Volume, P                    | ertinent Pages)                                                            |                                       |
| 4 | υ           |                                                  |                                       |                                       |                                                               |                                        | 1111                                                                       |                                       |
| † |             |                                                  |                                       |                                       |                                                               |                                        |                                                                            |                                       |
|   |             | <del></del>                                      |                                       |                                       |                                                               |                                        |                                                                            | .,                                    |
|   | V           |                                                  |                                       |                                       |                                                               |                                        |                                                                            |                                       |
|   | v           |                                                  |                                       |                                       |                                                               |                                        |                                                                            |                                       |
|   | v           | <u> </u>                                         |                                       |                                       |                                                               |                                        |                                                                            | <del></del>                           |
|   |             |                                                  |                                       |                                       |                                                               |                                        |                                                                            |                                       |
|   |             |                                                  |                                       |                                       |                                                               |                                        | ·                                                                          |                                       |

PAGE 65/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

Part of Paper No. 18



#### United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address COMMISSIONER FOR PATENTS P.O. Box 1450 Almendria, Vrightle 22313-1450 www.uspio.gov

### NOTICE OF ALLOWANCE AND FEE(S) DUE

30159

7590

12/27/2004

ATTN: LEGAL-MANUFACTURING KINETIC CONCEPTS, INC. P.O. BOX 659508 SAN ANTONIO, TX 78265-9508

| БХ       | AMINER       |
|----------|--------------|
| DEMILI   | le, danton d |
| ART UNIT | PAPER NUMBER |

DATE MAILED: 12/27/2004

3764

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/458,280      | 12/10/1999  | RICHARD C. VOGEL     | VAC.331,            | 8678             |

TITLE OF INVENTION: THERAPEUTIC APPARATUS FOR TREATING ULCERS

| APPLN. TYPE    | SMALL ENTITY | issue pee | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1400    | <b>\$0</b>      | · \$1400         | 03/28/2005 |

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

#### HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.

B. If the status above is to be removed, check box 5b on Part B -Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL BNTTTY is shown as NO:

A. Pay TOTAL FEE(S) DUE shown above, or

B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEB shown above.

U. PART B - FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B - Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fce(s) Transmittal should be completed and an extra copy of the form should be submitted.

III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

Page 1 of 3

PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

PAGE 66/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14-

|                                                                                                                                                                                                                                                                                                                    | Annticotley No.                                                                                   | The state of the s |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                                                                    | Application No.                                                                                   | Applicant(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Notice of Allowability                                                                                                                                                                                                                                                                                             | 09/458,280                                                                                        | VOGEL ET AL.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                                                                    | Examiner                                                                                          | Art Unit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                                                                                                                                                                                                                                                                    | Danton DeMille                                                                                    | 3764                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| The MAILING DATE of this communication appear<br>All claims being allowable, PROSECUTION ON THE MERITS IS (6)<br>herewith (or previously mailed), a Notice of Allowance (PTOL-85) of<br>NOTICE OF ALLOWABILITY IS NOT A GRANT OF PATENT RIG<br>of the Office or upon petition by the applicant. See 37 CFR 1.313 4 | OR REMAINS) CLOSED in this appropriate communication that appropriate communication is subject to | plication. If not included                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 1. A This communication is responsive to 8/17/2004.                                                                                                                                                                                                                                                                | •                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 2. The allowed claim(s) is/are 1-17.                                                                                                                                                                                                                                                                               |                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 3. A The drawings filed on 10 December 1999 are accepted by the                                                                                                                                                                                                                                                    | ne Examiner.                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 4. ☐ Acknowledgment is made of a claim for foreign priority und a) ☐ All b) ☐ Some* c) ☐ None of the:                                                                                                                                                                                                              |                                                                                                   | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 1. Certified copies of the priority documents have b                                                                                                                                                                                                                                                               | een received.                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 2. Certified copies of the priority documents have b                                                                                                                                                                                                                                                               | een received in Application No                                                                    | • .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 3. Copies of the certified copies of the priority docu                                                                                                                                                                                                                                                             | ments have been received in this r                                                                | national stage application from the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| International Bureau (PCT Rule 17.2(a)).                                                                                                                                                                                                                                                                           |                                                                                                   | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| * Certified copies not received:                                                                                                                                                                                                                                                                                   | • • • • • •                                                                                       | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Applicant has THREE MONTHS FROM THE "MAILING DATE" of noted below. Failure to timely comply will result in ABANDONMEI THIS THREE-MONTH PERIOD IS NOT EXTENDABLE.                                                                                                                                                   | this communication to file a reply o                                                              | complying with the requirements                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 5. A SUBSTITUTE OATH OR DECLARATION must be submitted INFORMAL PATENT APPLICATION (PTO-152) which gives                                                                                                                                                                                                            | ed. Note the attached EXAMINER's reason(s) why the oath or declarat                               | S AMENDMENT or NOTICE OF ion is deficient.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 6. CORRECTED DRAWINGS ( as "replacement sheets") must be                                                                                                                                                                                                                                                           | e submitted.                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| (a) including changes required by the Notice of Draftsperson                                                                                                                                                                                                                                                       |                                                                                                   | 48) attached .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 1) I hereto or 2) I to Paper No./Mail Date                                                                                                                                                                                                                                                                         | ·                                                                                                 | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| (b) ☐ including changes required by the attached Examiner's A Paper No./Mail Date                                                                                                                                                                                                                                  | mendment / Comment or in the Of                                                                   | fice action of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| identifying indicia such as the application number (see 37 CFR 1.84) each sheet. Replacement sheet(s) should be labeled as such in the                                                                                                                                                                             | (c)) should be written on the drawing header according to 37 CFR 1.121(d)                         | gs in the front (not the back) of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 7. DEPOSIT OF and/or INFORMATION about the deposit attached Examiner's comment regarding REQUIREMENT FO                                                                                                                                                                                                            | of BIOLOGICAL MATERIAL m<br>R THE DEPOSIT OF BIOLOGICA                                            | ust be submitted. Note the<br>L MATERIAL.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                                                    |                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Attachment(s)  1.  Notice of References Cited (PTQ-892)                                                                                                                                                                                                                                                            | <b>ph   Pink   a a 1/4</b>                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 2.  Notice of Craftperson's Patent Drawing Review (PTO-948)                                                                                                                                                                                                                                                        | 5. Notice of Informal Pai                                                                         | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| ·                                                                                                                                                                                                                                                                                                                  | 6. 🔲 Interview Summary (F<br>Paper No./Mail Date                                                  | - 1O-413),                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 3. Information Disclosure Statements (PTO-1449 or PTO/SB/08), Paper No./Mail Date                                                                                                                                                                                                                                  | 7. Examiner's Amendme                                                                             | ent/Comment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Examiner's Comment Regarding Requirement for Deposit                                                                                                                                                                                                                                                               | 8. 🔲 Examiner's Statement                                                                         | t of Reasons for Allowance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| of Biological Material                                                                                                                                                                                                                                                                                             | 9. <b>Other</b>                                                                                   | Danton DeMille<br>Primary Examiner<br>Art Unit: 3764                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|                                                                                                                                                                                                                                                                                                                    |                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

U.S. Patent and Trademark Office PTOL-37 (Rev. 1-04)

Notice of Allowability

Part of Paper No./Mall Date 20041221



## United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Tratemork Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450
Alexandric, Virginia 22313-1450

| APPLICATION NO.                                  | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO.             | CONFIRMATION NO. |
|--------------------------------------------------|-------------|----------------------|---------------------------------|------------------|
| 09/458,280                                       | 12/10/1999  | RICHARD C. VOGEL     | VAC.331.                        | 8678             |
| 30159 755                                        |             |                      | EXAMI                           | NER              |
| ATTN: LEGAL-MANUFACTURING KINETIC CONCEPTS, INC. |             | DEMILLE, DANTON D    |                                 |                  |
| P.O. BOX 659508                                  | •           |                      | ART UNIT                        | PAPER NUMBER     |
| SAN ANTONIO, TX 78265-9508                       |             |                      | 3764                            |                  |
|                                                  |             |                      | ТАТЕ МАП ПТ: 12 <i>0</i> 2/2004 |                  |

# Determination of Patent Term Adjustment under 35 U.S.C. 154 (b) (application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 0 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 0 day(s).

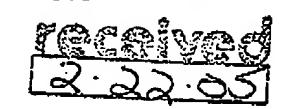
If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571) 272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at (703) 305-8283.



#### UNITED STATES PATENT AND TRADEMARK OFFICE



COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OPPICE
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

ATTN: LEGAL-MANUFACTURING KINETIC CONCEPTS, INC. P.O. BOX 659508 SAN ANTONIO, TX 78265-9508

**COPY MAILED** 

FEB 1 8 2005

OFFICE OF PETITIONS

In re Application of Richard C. Vogel, et al. Application No. 09/458,280 Filed: December 10, 1999 Attorney Docket No. VAC.331.1

ON PETITION

This is a decision on the petition, filed February 14, 2005, under 37 CFR 1.313(c)(2) to withdraw the above-identified application from issue after payment of the issue fee.

The petition is GRANTED.

The above-identified application is withdrawn from issue for consideration of a submission under 37 CFR 1.114 (request for continued examination). See 37 CFR 1.313(c)(2).

Petitioner is advised that the issue fee paid on January 21, 2005, in the above-identified application cannot be refunded. If, however, the above-identified application is again allowed, petitioner may request that it be applied towards the issue fee required by the new Notice of Allowance. <sup>1</sup>

Telephone inquiries relating to this decision should be directed to the undersigned at (571) 272-3204.

The application is being referred to Technology Center AU 3764 for further processing of the request for continued examination under 37 CFR 1.114.

Sherry D. Brinkley
Petitions Examiner
Office of Petitions
Office of the Deputy Commission

Office of the Deputy Commissioner for Patent Examination Policy

DOCKET POR:

DOCKET BY:

VAC.331ALLS

The request to apply the issue fee to the new Notice may be satisfied by completing and returning the new Issue Fee Transmittal Form PTOL-85(b), which includes the following language thereon: "Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or re-apply any previously paid issue fee to the application identified above." Petitioner is advised that, whether a fee is Indicated as being due or not, the Issue Fee Transmittal Form must be completed and timely submitted to avoid abandonment. Note the language in bold text on the first page of the Notice of Allowance and Fee(s) Due (PTOL-85).



## United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

## NOTICE OF ALLOWANCE AND FEE(S) DUE

30159

7590

06/01/2005

ATTN: LEGAL-MANUFACTURING KINETIC CONCEPTS, INC. P.O. BOX 659508 SAN ANTONIO, TX 78265-9508

**EXAMINER** DEMILLE, DANTON D

PAPER NUMBER

3764

ART UNIT

DATE MAILED: 06/01/2005

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTOENEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/458,280      | 12/10/1999  | RICHARD C. VOGEL     | VAC.33),1           | 8678             |

TITLE OF INVENTION: THERAPEUTIC APPARATUS FOR TREATING ULCERS

| APPLN. TYPE    | SMALL ENTITY | ISSUE PEE | · PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-------------------|------------------|------------|
| conprovisional | NO           | \$1400    | .20               | ···\$1400···     | 09/01/2005 |

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

#### HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

- A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.
- B. If the status above is to be removed, check box 5b on Part B -Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

- A. Pay TOTAL FEE(S) DUE shown above, or
- B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box Sa on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.

U. PART B - FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B - Fec(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fee(s) Transmitted should be completed and an extra copy of the form should be submitted.

III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

Page 1 of 3

PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

PAGE 70/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14



## United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE
United States Patcut and Trademark Office
Address COMMISSIONER FOR PATENTS
P.O. Box 1450
Abstandria, Virginia 22313-1450
www.uspro.gov

| APPLICATION NO.                                  | FILING DATE  | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO.     | CONFIRMATION NO. |  |
|--------------------------------------------------|--------------|----------------------|-------------------------|------------------|--|
| 09/458,280                                       | 12/10/1999   | RICHARD C. VOGEL     | VAC.331,1               | 8678             |  |
| 30159 759                                        | 00,00,2000   |                      | EXAMINER                |                  |  |
| ATTN: LEGAL-MANUFACTURING KINETIC CONCEPTS, INC. |              |                      | DEMILLE, DANTON D       |                  |  |
| P.O. BOX 659508                                  |              |                      | . ART UNIT              | PAPER NUMBER     |  |
| SAN ANTONIO, TX 78265-                           | X 78265-9508 |                      | 3764                    |                  |  |
|                                                  |              | . •                  | DATE MAILED: 06/01/2005 |                  |  |

Determination of Patent Term Adjustment under 35 U.S.C. 154 (b) (application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 0 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 0 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571) 272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at (703) 305-8283.

| •                                                                                                                                                                                                                                                                                            | Application No.                                                                     | Applicant(s)                                             |                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------|------------------|
| Notice of Allowability                                                                                                                                                                                                                                                                       | 09/458,280                                                                          | VOGEL ET AL                                              |                  |
| Notice of Allowapinty                                                                                                                                                                                                                                                                        | Examiner                                                                            | Art Unit                                                 |                  |
|                                                                                                                                                                                                                                                                                              | Danton DeMille                                                                      | 3764                                                     |                  |
| The MAILING DATE of this communication appeal All claims being allowable, PROSECUTION ON THE MERITS IS herewith (or previously mailed), a Notice of Allowance (PTOL-85) NOTICE OF ALLOWABILITY IS NOT A GRANT OF PATENT RI of the Office or upon petition by the applicant. See 37 CFR 1.313 | (OR REMAINS) CLOSED in<br>or other appropriate commu<br>GHTS. This application is a | this application. If not included                        | THIS<br>nitiativ |
| 1. This communication is responsive to IDS filed 2/14/05.                                                                                                                                                                                                                                    |                                                                                     |                                                          |                  |
| 2. The allowed claim(s) is/are 1-17.                                                                                                                                                                                                                                                         |                                                                                     |                                                          |                  |
| 3. The drawings filed on 10 December 1999 are accepted by                                                                                                                                                                                                                                    | the Examiner.                                                                       |                                                          |                  |
| 4. Acknowledgment is made of a claim for foreign priority una  a) All b) Some c) None of the:                                                                                                                                                                                                |                                                                                     | or (f).                                                  |                  |
| 1. Certified copies of the priority documents have                                                                                                                                                                                                                                           | been received.                                                                      |                                                          |                  |
| 2. Certified copies of the priority documents have                                                                                                                                                                                                                                           | been received in Application                                                        | n No,                                                    |                  |
| 3. Copies of the certified copies of the priority doc                                                                                                                                                                                                                                        | uments have been received                                                           | in this national stage application from t                | the              |
| International Bureau (PCT Rule 17.2(a)).                                                                                                                                                                                                                                                     | •                                                                                   |                                                          |                  |
| * Certified copies not received:                                                                                                                                                                                                                                                             | w                                                                                   |                                                          |                  |
| Applicant has THREE MONTHS FROM THE "MAILING DATE" of noted below. Failure to timely comply will result in ABANDONME THIS THREE-MONTH PERIOD IS NOT EXTENDABLE.  5. A SUBSTITUTE OATH OR DECLARATION must be submitted.                                                                      | NT of this application.                                                             | •                                                        |                  |
| 5. A SUBSTITUTE OATH OR DECLARATION must be submitted information (PTO-152) which gives                                                                                                                                                                                                      | reason(s) why the oath or                                                           | MINER'S AMENDMENT or NOTICE OF declaration is deficient. | •                |
| 6. CORRECTED DRAWINGS ( as "replacement sheets") must                                                                                                                                                                                                                                        | be submitted.                                                                       |                                                          |                  |
| (a) Including changes required by the Notice of Draftsperso                                                                                                                                                                                                                                  | n's Patent Drawing Review                                                           | ( PTO-948) attached                                      |                  |
| 1) 🔲 hereto or 2) 🔲 to Paper No./Mail Date                                                                                                                                                                                                                                                   |                                                                                     |                                                          |                  |
| (b) including changes required by the attached Examiner's A<br>Paper No./Mail Date                                                                                                                                                                                                           | Amendment / Comment or I                                                            | n the Office action of                                   |                  |
| Identifying indicia such as the application number (see 37 CFR 1.84 each sheet. Replacement sheet(s) should be labeled as such in the                                                                                                                                                        | k(c)) should be written on the<br>header according to 37 CFR                        | drawings in the front (not the back) of                  | •                |
| 7. DEPOSIT OF and/or INFORMATION about the deposit attached Examiner's comment regarding REQUIREMENT FO                                                                                                                                                                                      | of BIOLOGICAL MATER                                                                 | PIAI must be submitted. Note tha                         |                  |
|                                                                                                                                                                                                                                                                                              |                                                                                     | •                                                        |                  |
| Attachment(s)                                                                                                                                                                                                                                                                                |                                                                                     |                                                          |                  |
| Notice of References Cited (PTO-892)                                                                                                                                                                                                                                                         |                                                                                     | ma! Patent Application (PTO-152)                         |                  |
| 2.  Notice of Draftperson's Patent Drawing Review (PTO-948)                                                                                                                                                                                                                                  | 6. Interview Sur                                                                    | mary (PTO-413),                                          |                  |
| . ☑ Information Disclosure Statements (PTO-1449 or PTO/SB/08), Paper No./Mail Date                                                                                                                                                                                                           | 7. Examiner's Ar                                                                    | nendment/Comment                                         |                  |
| .   Examiner's Comment Regarding Requirement for Deposit                                                                                                                                                                                                                                     | 8.                                                                                  | atement of Reasons for Allowance                         |                  |
| of Biological Material                                                                                                                                                                                                                                                                       | 9. Other                                                                            | Danton DeMille<br>Primary Examiner                       |                  |

U.S. Patent and Trademark Office PTOL-37 (Rev. 1-04)

1-04) Notice of Allowability

Part of Paper No./Mail Date 20050531

Sheet 1

Under the Paperwork Reduction Act of 1998 Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE are required to respond to a collection of information unless it contains a valid OMB control number. Substitute for form 1449/PTQ FEB 1 4 2005

## INFORMATION DESCLOSUSE STATEMENT BY ARRIVANT

(Use as many sheets as necessary)

of 7

|          | Complete if Known                         | •  |
|----------|-------------------------------------------|----|
| ł        | Application Number                        |    |
|          | Filing Date December 10, 1000 The Page 18 | ,  |
| ۲        | First Named Inventor VOGEL, Richard C.    |    |
| <u> </u> |                                           | nΕ |
|          | Examiner Name DEAULE CER 1 8 20           | 05 |

DEMILLE, Danton D Attorney Docket Number IVAC.331A.US

| <u> </u>    | <u> </u>              |              |                            |                          | Attorney Docket Number V                          | Evaluation D. : Example 1    |
|-------------|-----------------------|--------------|----------------------------|--------------------------|---------------------------------------------------|------------------------------|
|             | Examiner<br>Initials* | Cite<br>No.1 | Document Number            | U. S. PATE               | NT DODLE                                          | AC.331A.US OFFICE OF FE      |
| F           | a                     |              | Number 10.                 |                          | Name of Patentee or<br>Applicant of Cited Documen | Pages, Columns, Lines, Where |
| F           | 4                     |              | US- 1355846<br>US- 2547758 | 10-19-1920               | Rannells                                          | Figures Appear               |
| <b> </b>    | Ge ]                  |              | 2632443                    | 04-03-1951               | Keeling                                           | Figs. 1,2                    |
| • -         | 60                    |              | JS-2682873                 | 03-24-1953<br>07-06-1954 | Lesher                                            | Fig. 2                       |
|             | 100                   |              | \$ 2969057<br>\$ 3367332   | 01-24-1961               | Evans et al.                                      | Figs. 1-3<br>Fig. 2          |
|             | 0                     | - tu         | 3367332<br>3-3648692       | 02-06-1968               | Simmons<br>Groves                                 | Figs. 1-6                    |
| -           | Ø [                   | U            | 3682180                    | 03-14-1972               | Wheeler                                           | Figs. 1, 4                   |
|             | Q)                    | us           | 3826254                    | 08-08-1972               | McFarlane                                         | Fig. 1                       |
|             | 0                     |              | 4080970                    |                          | Meilor                                            | Fig. 3                       |
|             | 7                     | US.          | 4096853<br>4139004         |                          | Miller                                            | Fig. 2 Column 1 - Column 3   |
| 4           | 20                    | US.          | 4165748                    | 02-13-1979               | Weigand<br>Gonzalez                               | Column 3, Lines 2-20         |
| -4          |                       | 43-          | 4245630                    | 08-28-1979               | Johnson                                           | Column 4                     |
| 1-9         |                       | US.          | 1261363                    | 01-20-1981               | loyd et al.                                       | Fig. 2                       |
| 4           |                       | US-          |                            | 00 00                    | KUS\$0                                            | Figs. 1, 4, 5                |
| 40          | _                     | US-A         |                            | 00 40                    | dair                                              | Fig. 1                       |
| Q           |                       | US- 4        | 333460                     | 11-03-1981 G             | olub                                              | Fig. 3                       |
| E-o-i-      |                       |              |                            |                          | eist                                              | Fig. 1                       |
| C XXIIII IA |                       |              |                            | _                        |                                                   |                              |

| <u> </u>     |                          |                       | Geist         |                           | 1.19.1                                | _              |
|--------------|--------------------------|-----------------------|---------------|---------------------------|---------------------------------------|----------------|
| Examiner     | Cite   Foreign Dage      | FORE                  |               |                           | Fig. 2, 4                             |                |
| eslettini    | Cite Foreign Patent Docu | nent FOREIGI          | N PATENT DOCI | MENTO                     | -00, -1                               |                |
|              |                          |                       | Publication   | MEN IS                    |                                       |                |
|              | AU-550575- Ad            |                       | ⊣ Date        | Name of Patentee or       | Pages Oak                             |                |
|              | AU-550575-A1             | Kind Codes (if known) | MM-DD-YYYY    | Applicant of Cited Docume | · · · · · · · · · · · · · · · · · · · |                |
| 7            |                          |                       |               |                           | ]                                     | <b>!</b>       |
| 60           | EP-0100148               |                       | 08-26-1982    | Wright                    | Or Relevant Figures Appear            | T <sup>6</sup> |
| Q T          | WO DOID                  |                       | 100           |                           | P.4, lines 7-10                       |                |
|              | WO 96/05873              |                       |               | Naylor, et al             | 7.71 11/05 7-10                       | $\Box$         |
| 40           | WO 97/18007              |                       | 02-29-1996    | 3101 01 21                | Abstract                              |                |
| Q0           | EP 040400                |                       | DE DO (===    | ina                       |                                       |                |
| 0            | EP-0161865               |                       | 05-22-1997    | lunt                      | <del></del>                           | 7              |
|              | EP-0117632-A2            |                       | 11 21 100     |                           |                                       | <b>→</b>       |
|              | 7002-72                  |                       | 04 4 2        | Vard                      |                                       |                |
| Examiner     | A                        |                       | 01-1984 J     | McCracken                 | <b>-</b>                              | $\neg$         |
| Signature    | and am                   |                       |               | - BOKON                   |                                       | <b>=</b>       |
| *EXAMINER: I | nitto Is                 |                       |               |                           |                                       | _ [            |

\*EXAMINER: Initial If reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant a unique citation designation number (optional). See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. Enter Office that issued the document, by the two-letter code (WIPO Standard \$7.3). For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. Wind of document by Japanese parent eocuments, the indicated on the document under WIPO Standard ST.18 if possible. Applicant is to place a check mark here if English language

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the process) as continuous. Consideration in antimated to take 2 between the complete USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments including gathering, preparing, and submitting the completed application form to the upplic. Time will vary depending upon the intervious case. Any comments of the amount of time you require to complete this form and/of suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office and Trademark Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND

|                       |                                               | ·                      | PTO/SB/06A (08-03)                                                                                                                              |     |
|-----------------------|-----------------------------------------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| Under the Paperwork   | Reduction Act of 1995 no parsons are required |                        | eroved for use through 07/31/2006. OMB 0651-0031 emark Office; U.S. DEPARTMENT OF COMMERCE ation unless it contains a valid OMB control number. |     |
| Substitute for form 1 | / %\                                          | Co                     | mplete if Known                                                                                                                                 |     |
|                       | FEB 1 4 2005 C                                | Application Number     | 09/458,280                                                                                                                                      |     |
| INFORMA               | TION DISCLOSURE                               | Filing Date            | December 10, 1999                                                                                                                               | _   |
|                       |                                               | First Named Inventor   | VOGEL, Richard C. 0 2005                                                                                                                        |     |
|                       | ENTERARPLICANT                                | Art Unit               | 3764                                                                                                                                            |     |
| (Use as               | many sheets as necessary)                     | Examiner Name          | DEMILLE, Danton D.                                                                                                                              | INS |
| eet  2                | of 7                                          | Attorney Docket Number | VAC.331A.US OFFICE U                                                                                                                            |     |

| Examiner<br>Initials* | Cite<br>No. | Document Number  Number-Kind Code <sup>2 pr Andrew</sup> | Publication Date MM-DD-YYYY | Name of Patentee or<br>Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
|-----------------------|-------------|----------------------------------------------------------|-----------------------------|----------------------------------------------------|---------------------------------------------------------------------------|
| Q                     |             | US- 4373519                                              | 02-15-1983                  | Errede et al.                                      | Column 4                                                                  |
|                       |             | US-                                                      |                             |                                                    |                                                                           |
| Q                     |             | us- 4392853                                              | 07-12-1983                  | Muto                                               | Fig. 11                                                                   |
| Q)                    |             | <sup>US-</sup> 4392858                                   | 07-12-1983                  | George et al.                                      | Column 3, Lines 5-58                                                      |
| (C)                   |             | <sup>US-</sup> 4419097                                   | 12-06-1983                  | Rowland                                            | Fig. 8                                                                    |
| 4                     |             | <sup>US-</sup> 4475909                                   | 10-09-1984                  | Eisenberg                                          | Figs. 1, 3, 6                                                             |
| O                     |             | US- 4480638                                              | 11-06-1984                  | Schmid                                             | Flgs. 2, 3                                                                |
| GO                    |             | US- 4525166                                              | 06-25-1985                  | Leclerc                                            | Column 5-6                                                                |
| 0                     |             | <sup>US-</sup> 4525374                                   | 06-25-1985                  | Vailancourt                                        |                                                                           |
| (A)                   |             | US- 4540412                                              | 09-10-1985                  | Van Overloop                                       | Column 2                                                                  |
| Q                     |             | <sup>US-</sup> 4543100                                   | 09-24-1985                  | Brodsky                                            | Fig. 4                                                                    |
| Ab                    |             | <sup>US-</sup> 4551139                                   | 11-05-1985                  | Plaas et al.                                       | C1, L 66 - C2, L68                                                        |
| 40                    |             | <sup>US-</sup> 4569348                                   | 02-11-1986                  | Hasslinger                                         | C2, L50 - C4, L 27                                                        |
| 100                   |             | us- 4605399                                              | 08-12-1986                  | Weston et al.                                      | Fig. 3                                                                    |
| 60                    |             | US- 4608041                                              | 08-26-1986                  | Nielson                                            |                                                                           |
| a                     |             | US-4640688                                               | 02-03-1987                  | Hauser                                             | Fig. 2                                                                    |
| a                     |             | <sup>US-</sup> 4655754                                   | 04-07-1987                  | Richmond et al.                                    | Column 1, Line 39-44                                                      |
| 0                     |             | <sup>US-</sup> 4733659                                   | 03-29-1988                  | Edenbaum et al.                                    | Fig. 1                                                                    |
| a                     |             | US-4743232                                               | 05-10-1988                  | Kruger                                             | Figs. 2-4                                                                 |

|                       |              | FOREIGN                                                                           | I PATENT DOCL               | JMENTS                                             |                                                                                 |   |
|-----------------------|--------------|-----------------------------------------------------------------------------------|-----------------------------|----------------------------------------------------|---------------------------------------------------------------------------------|---|
| Examinar<br>Initials* | Cite<br>No.1 | Foreign Patent Document                                                           | Publication Date MM-DD-YYYY | Name of Patentee or<br>Applicant of Cited Document | Pages, Columns, Lines,<br>Where Relevant Passages<br>Or Relevant Figures Appear |   |
|                       |              | Country Code <sup>3</sup> "Number <sup>4</sup> "Kind Code <sup>5</sup> (If known) |                             | , , , , , , , , , , , , , , , , , , , ,            |                                                                                 | T |
|                       |              | PCT/GB98/02713 W099/17743                                                         | 09-09-1998                  | KCI Medical Ltd                                    |                                                                                 |   |
| G                     |              | AU-745271                                                                         | 03-14-2002                  | KCI Medical Ltd                                    |                                                                                 |   |
| Cd2                   |              | SG-71559                                                                          | 04-16-2002                  | KCI Medical Ltd                                    |                                                                                 |   |
| QQ_                   |              | GB-2,329,127 B                                                                    | 08-16-2000                  | KCI Medical Ltd                                    |                                                                                 |   |
| 600                   |              | GB-2,333,965 A                                                                    | 08-11-1999                  | KCI Medical Ltd                                    |                                                                                 |   |
| GR.                   |              | AU-755396                                                                         | 12-12-2002                  | KCI Medical Ltd                                    |                                                                                 |   |

Examiner Signature Out Ordered 6/7/5

"EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. Applicant's unique citation designation number (optional). See Kinds Codes of USPTO Patent Documents at <a href="https://www.uspto.gov">www.uspto.gov</a> or MPEP 601.04, Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

OFFICE OF PETITIONS

PTO/SB/08A (08-03) Approved for use through 07/31/2006, OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1991, no peepens are required to respond to a collection of information unless it contains a valid OMB control number. Complete if Known **Application Number** 09/458,280 RECEIVED December 10, 1999 Filing Date First Named Inventor VOGEL, Richard C. FEB 1 8 2005 Art Unit 3764 DEMILLE, Danton D. Examiner Name

VAC.331A.US

INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as A Pa

3 of 17 Sheet

Substitute for form 1449/PTO

U. S. PATENT DOCUMENTS Examiner Cita Document Number Publication Date Name of Patentee or Pages, Columns, Lines, Where No.1 initials\* MM-DD-YYYY Applicant of Cited Document Relevant Passages or Relevant Number-Kind Code<sup>2 (7 know)</sup> Figures Appear <del>US-</del> 4787888 al 11-29-1988 Figs. 1, 4-6 Fox <sup>US-</sup> 4826949 Richmond et al. 05-02-1989 Column 1 US-4838883 06-13-1989 Matsuura Fig. 7 <sup>US-</sup> 4840187 06-20-1989 Column 2, Line 34-42 **Brazier** US- 4863449 09-05-1989 Therriault et al. Column 3, Line 45-68 US- 4872450 10-10-1989 Austad Column 3-4 US-4878901 11-07-1989 Sachse US-4897081 01-30-1990 C3, L25 - C4 Poirier et al. US-4906233 03-05-1990 Moriuchi et al. **Abstract** <sup>US-</sup>4906240 03-06-1990 Reed et al. Fig. 1 US- 4919654 · 04-24-1990 Kalt Column 3, Line 8-39 us-4941882 07-17-1990 Ward et al. Column 3, Line 38-64 <sup>US-</sup> 4953565 09-04-1990 Tachibana et al. Fig. 1 US-US-4985019 01-15-1991 Michelson Column 1, Line 47-58 US-5037397 Ø 08-06-1991 Kalt et al. Figs.1, 2, 4, 6 <sup>US-</sup> 5100396 Zamierowski 03-31-1992 Figs. 1-10 US-<sup>US-</sup> 5167613 12-01-1992 Figs. 4-5 Karami et al.

Attorney Docket Number

|                                          |              | FORE                                | IGN PATENT DOCL     | JMENTS                                             | -                                                 |    |
|------------------------------------------|--------------|-------------------------------------|---------------------|----------------------------------------------------|---------------------------------------------------|----|
| Examiner<br>Initials*                    | Cite<br>No.' | <b>16   Foreign Patent Document</b> | Publication<br>Date | Name of Patentee or<br>Applicant of Cited Document | Pages, Columns, Lines,<br>Where Relevant Passages |    |
| VI (************************************ |              |                                     | MM-DD-YYYY          |                                                    | Or Relevant Figures Appear                        | Ta |
| a                                        |              | GB-692,578                          | 06-10-1953          | Minnesota Min                                      |                                                   |    |
| AD.                                      |              | WO 80/02182                         | 10-16-1980          | Moss, James                                        |                                                   |    |
| 100                                      |              | WO/94/20041                         |                     | WFU/Argenta, L.                                    |                                                   |    |
| 00                                       |              | DE-295 04 378 U1                    | 09-14-1995          |                                                    |                                                   |    |
| (A)                                      |              | DE-43 06 478 A1                     | 09-08-1994          | Wagner, W.                                         |                                                   |    |
| 42                                       |              | CA-2005436                          |                     | Kalt, Glenda G.                                    |                                                   |    |

Examiner Date Signature Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. Applicant's unique citation designation number (optional). 2 See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. Kind of document by the appropriate symbols as indicated on the document under WiPO Standard ST.16 if possible. "Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Sheet 4

PTO/SB/08A (08-03) U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE are required to respond to a collection of information unless it contains a valid OMB control number.

Inder the Paperwork Reduction Act of 1995, no persons Substitute for form 1449/PTO

INFORMATION

STATEMENT B' (Use as many sheets as nocessary)

of 7

| <u> </u>             | omplete if Known  |         |
|----------------------|-------------------|---------|
| Application Number   | 09/458,280        | POLICE: |
| Filing Date          | December 10, 1999 | HEV     |
| First Named Inventor | VOGEL, Richard C. | - 1     |
| Art Unit             | 3764              | -FEB.   |
| Evanier Name         |                   |         |

Examiner Name DEMILLE, Danton D. Aftomey Docket Number

| Exeminer<br>Initlals* | No.' Document Number       | Publication Date | NT DOCUMENTS                                       |                                                         |
|-----------------------|----------------------------|------------------|----------------------------------------------------|---------------------------------------------------------|
| Q)                    | Number Vind Code 3 Without | WW-DD-YYYY       | Name of Patentee or<br>Applicant of Cited Document | Pages, Columns, Unes, Whi<br>Relevant Passages or Relev |
|                       | US-5176663                 | 01-05-1993       | Svedman et al                                      | Figures Appear                                          |
|                       | US- 5232453                | 08-03-1993       | Plass et al.                                       | C1, L55 - C2, L8                                        |
| 10                    | US- 5261893                | 11-16-1993       | Zamierowski                                        | Fig. 2, 5                                               |
| 80                    | US- 5298015                | 03-29-1994       | Komatsuzaki et al.                                 | Figs. 1, 13, 16                                         |
| 2                     | US- 5344415                | 09-06-1994       | Debusk et al.                                      | Abstract                                                |
| 10 1                  | US-5358494                 | 10-25-1994       | Svedman                                            | Column 2, Line 9 -42                                    |
|                       | US- 5527293                | 06-18-1996       | Zamierowski                                        | Column 2, Line 34-47                                    |
| 7                     | US- 5556375                | 09-17-1996       | Ewall                                              | C11, L 62 - C12, L37                                    |
| 40                    | US- 5607388                | 03-04-1987       | Ewall                                              | C3, L62 - C4, L65                                       |
| 0                     | US- 5636643                | 06-10-1997       | Argenta et al.                                     | Column 3-4                                              |
| 4                     | US- 5645081                | 07-08-1997       | Argenta et al.                                     | C6, Lines 18 - 64                                       |
| 40                    | US- 6071267                | 06-06-2000       | Zamlerowski                                        | C4, L28 - C5, L22                                       |
| (10                   | US- 6135116                |                  | Vogel et al.                                       | Figs. 1-3                                               |
|                       | US- 20020115951 A1         |                  | Norstream et al.                                   | Column 9                                                |
|                       | US- 20020120185 A1         |                  | Johnson                                            |                                                         |
| 4                     | US- 20020143286 A1         | 4 4 5 5          | Tumey                                              | Fig. 3                                                  |
| 4                     | US- 6488643                | 4 =              | Tumey et al.                                       | Paragragh 26                                            |
| 59                    | US-6493568                 |                  | Ball, et al.                                       |                                                         |
|                       | US- 4,233,969              |                  |                                                    |                                                         |
|                       |                            | 17.00            | ock, et al.                                        | C2, Lines 25 - 53                                       |

| Country Code <sup>3</sup> Number 1 WO 93/09727 | Publication Date MM-DD-YYYY | Name of Petentee or<br>Applicant of Cited Document | Pages, Columns, Lines,<br>Where Relevant Passages<br>Or Relevant Figures Appea |
|------------------------------------------------|-----------------------------|----------------------------------------------------|--------------------------------------------------------------------------------|
| GB-2 197 789 A                                 | <br>5-27-93                 | AGENTA                                             |                                                                                |
| EP-0358 302<br>DE 26 40 413 A1                 | 03-14-1990                  | Smith Industrie Smith Industrie                    |                                                                                |
| DL 20 40 413 A1                                | <br>03 09 1978              | Wolf, Richard                                      |                                                                                |
|                                                |                             | TOTAL TRICALE                                      |                                                                                |

Signature

Date

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. Applicant's unique citation designation number (optional). See Kinds Codes of USPTO Patent Documents at www.uapto.gov or MPEP 901.04. Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emparor must precede the serial number of the patent document. Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.18 If possible. Applicant is to place a check mark here if English language

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND

| Under the Paperwork | k Reduction Act 0 1995, no persons are required t | App<br>U.S. Patent and Trade<br>o respond to a collection of informa | proved for use through 07/31/200 | PTO/SB/08A (08-03)<br>X6. OMB 0651-0031<br>IT OF COMMERCE |       |
|---------------------|---------------------------------------------------|----------------------------------------------------------------------|----------------------------------|-----------------------------------------------------------|-------|
| Substitute for form | 1449/PTO                                          | Co                                                                   | mplete if Known                  | - Control Mario                                           | •     |
|                     | LEB 1 4 TOOL TA                                   | Application Number                                                   | 09/458,280                       | -0EIV                                                     | 1FD   |
| INFORM              | ATION DISCLOSPRE"                                 | Filing Date                                                          | December 10, 1999                | RECEI                                                     |       |
| STATEM              | ENT BY ARRESTANT                                  | First Named Inventor                                                 | VOGEL, Richard C.                |                                                           | ეენ   |
|                     | S many sheets as necessary)                       | Art Unit                                                             | 3764                             | EEB IO                                                    |       |
|                     | o many arrests as recussary)                      | Examiner Name                                                        | DEMILLE, Danton D.               | TOE OF FA                                                 | סודוה |
| Sheet 5_            | of 7                                              | Attorney Docket Number                                               | MAC 331A LIC                     | THE THE                                                   |       |

|           | <del></del> - |                                         | II G Darrie                  | 7.000111171770                                     | UTT                                                                      |
|-----------|---------------|-----------------------------------------|------------------------------|----------------------------------------------------|--------------------------------------------------------------------------|
| Examiner  | Cite          | Dogument Mush as                        |                              | TDOCUMENTS                                         |                                                                          |
| Initials" | No.1          | Number-Kind Code <sup>2</sup> (7 knows) | Publication Date MiM-DD-YYYY | Name of Patentee or<br>Applicant of Cited Document | Pages, Columns, Lines, When Relevant Passages or Relevant Figures Appear |
| (40       |               | US- 5,437,622                           | 08-01-1995                   | Carion, Jean-Pierre                                |                                                                          |
| 00        |               | <sup>US-</sup> 6,345,623                | 02-12-2002                   | Heaton, K., et al                                  |                                                                          |
| Q/        |               | <sup>US-</sup> 6,553,998                | 04-29-2003                   | Heaton, K., et al                                  |                                                                          |
| (A)       |               | <sup>US-</sup> 6,814,079                | 11-09-2004                   | Heaton, K., et al                                  |                                                                          |
| P         |               | <sup>US</sup> 5,437,651                 | 08-01-1995                   | Todd, R., et al                                    |                                                                          |
| 100       |               | <sup>US-</sup> 5,549,584                | 08-27-1996                   | Gross, James R.                                    |                                                                          |
| 30        |               | US- 5,134,994                           | 08-04-1992                   | Say, Sam L.                                        |                                                                          |
| 00        |               | <sup>US-</sup> 4,710,165                | 12-01-1987                   | McNeil, C.B., et al                                |                                                                          |
| 40        |               | υs-3,520,300                            | 07-14-1970                   | Flower, Guiles                                     |                                                                          |
| 2         |               | <sup>US-</sup> 4,758,220                | 07-19-1988                   | Sundblom, L., et al                                | •                                                                        |
| 100       |               | <sup>US-</sup> 5,279,550                | 01-18-1994                   | Habib, Magdi, et ai                                |                                                                          |
| M         |               | <sup>US-</sup> 5,092,858                | 03-03-1992                   | Benson C.D., et al                                 |                                                                          |
| 00        |               | us- 5,086,170                           | 02-04-1992                   | Luheshi A., et al                                  |                                                                          |
|           |               | ψs- 5,278,100                           | 01-11-1994                   | Doan, T., et al                                    |                                                                          |
|           |               | US-                                     |                              |                                                    |                                                                          |
|           |               | US-                                     |                              |                                                    |                                                                          |
|           |               | US-                                     |                              |                                                    | <del></del>                                                              |
|           |               | US-                                     |                              |                                                    |                                                                          |
|           |               | บร                                      | <u> </u>                     |                                                    |                                                                          |
|           |               |                                         |                              |                                                    |                                                                          |

|                    |              | FORE                                                                             | GN PATENT DOCU   | MENTS                                              |                                                       |   |
|--------------------|--------------|----------------------------------------------------------------------------------|------------------|----------------------------------------------------|-------------------------------------------------------|---|
| Examiner Initials* | Cite<br>No.1 | Foreign Patent Document                                                          | Publication Date | Name of Patentee or<br>Applicant of Cited Document | Pages, Columns, Lines,                                | T |
|                    |              | Country Code <sup>3</sup> Number <sup>4</sup> Nind Code <sup>5</sup> (If Intern) | MM-DD-YYYY       | Applicant of Offed Document                        | Where Relevant Passages<br>Or Relevant Figures Appear | 7 |
|                    |              | ·                                                                                |                  |                                                    |                                                       |   |
|                    |              |                                                                                  |                  |                                                    | <u> </u>                                              | 厅 |
|                    |              |                                                                                  |                  |                                                    |                                                       |   |
|                    |              |                                                                                  |                  |                                                    |                                                       | 广 |
|                    |              |                                                                                  |                  |                                                    |                                                       | Г |
|                    |              |                                                                                  |                  |                                                    |                                                       |   |

Examiner Signature Out Out 19

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. Applicant's unique citation designation number (optional). See Kinds Codes of USPTO Patent Documents at <a href="https://www.uspto.gov">www.uspto.gov</a> or MPEP 901.04. Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. Kind of document by translation is attached.

Translation is attached.

This collection of Information Is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

16

Sheet

FEB 1 4 2005

PTO/SB/08B (08-03)
Approved for use through 07/31/2008. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449/PTO

Complete if Known

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

of

Application Number 09/458,280

Filing Date December 10, 1999

First Named Inventor VOGEL, Richard C.

Art Unit 3764

Examiner Name DEMILLE, Danton D.

Attorney Docket Number VAC.331A.US OFFICE OF FETTIONS

|                    | l en                     | NON PATENT LITERATURE DOCUMENTS                                                                                                                                                                                                                                 |                |
|--------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| Examiner Initials* | Cite<br>No. <sup>1</sup> | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T <sup>2</sup> |
| Q.                 |                          | LOUIS C. ARGENTA, MD and MICHAEL J. MORYKWAS, PHD; Vacuum-Assisted Closure: A New Method for Wound Control and Treatment: Clinical Experience; Annals of Plastic Surgery,                                                                                       |                |
| a                  |                          | SUSAN MENDEZ-EASTMAN, RN; When Wounds Won't Heal, RN January 1998, Volume 61(1); Medical Economics Company, Inc., Montvale, NJ, USA.                                                                                                                            |                |
| Q_                 |                          | JAMES H. BLACKBURN, II, MD. et al; Negative-Pressure Dressings as a Bolster for Skin Grafts; Annals of Plastic Surgery, Volume 40, Number 5, May 1998, pages 453-457;                                                                                           |                |
| <b>GO</b>          |                          | JOHN MASTERS; Letter to the editor, British Journal of Plastic Surgery, 1998, Volume 51(3), page 267; Elsevier Science/The British Association of Plastic Surgeons, UK                                                                                          |                |
| Bal                | ,                        | S.E. GREER, et al; The Use of Subatmospheric Pressure Dressing Therapy to Clos<br>Lymphocutaneous Fistulas of the Groin; British Journal of Plastic Surgery (2000), 53                                                                                          |                |
| Go                 |                          | GEORGE V. LETSOU, M.D., et al; Stimulation of Adenylate Cyclase Activity in Cultured Endothelial Cells Subjected to Cyclic Stretch; Journal of Cardiovascular Surgery, 31, 1990                                                                                 |                |
| 90_                |                          | PCT International Search Report; PCT international application PCT/<br>GB98/02713; June 8, 1999                                                                                                                                                                 |                |
| Qo                 |                          | PCT Written Opinion; PCT international application PCT/GB98/02713; June 8, 1999                                                                                                                                                                                 |                |
| GD .               | 1                        | PCT International Examination and Search Report, PCT international application PCT/GB96/02802; Jan. 15, 1998 and April 29, 1997                                                                                                                                 |                |
| . Ge               | F                        | PCT Written Opinion, PCT international application PCT/GB/96/02802;<br>September 3, 1997                                                                                                                                                                        |                |

| Evenines      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |
|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|
| Examiner      | and the second of the second o | Date       |           |
| Signature     | a arobita                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Date       | 1 x 1 . / |
| oldinamic 1   | a statill                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Considered | 47 31/4-  |
| *FXAMINER: in | Itlal if reference considered whether as and it it                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            | 1 11/13   |

\*EXAMINER; Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached. This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:

| بۇ<br>  | Under the Paperwork Re | duglion  | Act of 1985, no persons a | U.S. Paten<br>re required to respond to a collection | Approved for use through t and Trademark Office; U.S. DEP | PTO/SB/08B (08-03)<br>07/31/2006, OMB 0651-0031<br>ARTMENT OF COMMERCE |
|---------|------------------------|----------|---------------------------|------------------------------------------------------|-----------------------------------------------------------|------------------------------------------------------------------------|
| Subsi   | dute for form 1449/PTO |          | FEB 1 4 2005 C            |                                                      | Complete If Known                                         | a valid OMB control number.                                            |
| INIE    |                        | 1        |                           | Application Number                                   | 09/458,280                                                |                                                                        |
| ST      | ORMATION<br>ATEMENT E  | A DAS    | CLOSERE                   | Filing Date                                          | December 10, 1999                                         | RECEIVED                                                               |
| 01      | WI CHAICIAL E          | 31 A     | PETCANT                   | First Named Inventor                                 | VOGEL, Richard C.                                         | 1 0 2005                                                               |
|         | (Use as many she       | ets as į | recessiy)                 | Art Unit                                             | 3764                                                      | LEB 7 8 VIIII                                                          |
| Oh a ci |                        | _        |                           | Examiner Name                                        | DEMILLE, Danton D.0                                       | FFICE OF FEITIUM                                                       |
| Sheet   | 7                      | of       | 7                         | Attorney Docket Number                               | VAC.331A.US                                               | )                                                                      |

|           |      |                                                                                                                                                                                                                                                                 | _                                      |
|-----------|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Examiner  | Cite | NON PATENT LITERATURE DOCUMENTS                                                                                                                                                                                                                                 |                                        |
| Initials* | No.1 | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | 72                                     |
| 8p .      |      | KOSTYUCHENOK, B.M, et al. ;Vacuum Treatment in the Surgical Management of Purulent Wounds; Vestnik Khirurgi, September 1986                                                                                                                                     |                                        |
| aa        |      | DAVYDOV, Yu. A., et al; Vacuum Therapy in the Treatment of Purulent Lactation Mastitis; Vestnik Khirurgi, September 1986                                                                                                                                        |                                        |
| Q         | ·    | YUSUPOV, Yu. N., et al; Active Wound Drainage, Vestnik Khirurgi, Vol. 138, Issue 4, 1987.                                                                                                                                                                       |                                        |
| la        |      | DAVYDOV, Yu. A., et al; Bacteriological and Cytological Assessment of Vacuum Therapy of Purulent Wounds; Vestnik Khirurgi, October 1988                                                                                                                         |                                        |
| G G       | J    | DAVYDOV, Yu. A., et al; Concepts For the Clinical-Biological Management of the Wound Process in the Treatment of Purulent Wounds by Means of Vacuum Therapy; Vestnik Khirurgi                                                                                   |                                        |
| a         |      | Internation Search Report for PCT international application PCT/<br>GB95/01983; November 23, 1995                                                                                                                                                               |                                        |
| <u>QQ</u> |      | Patent Abstract of Japan; JP4129536; Terumo Corporation; April 30, 1992                                                                                                                                                                                         |                                        |
|           |      |                                                                                                                                                                                                                                                                 |                                        |
|           |      |                                                                                                                                                                                                                                                                 |                                        |
|           |      |                                                                                                                                                                                                                                                                 | ······································ |

| Examiner     | $\Omega \Omega = I$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |         |
|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------|
| Cianatura    | (1) [1] [2] [2] [2]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | i Date     |         |
| Signature    | Calda Palle                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Canaldana  | 27/2/i  |
| *EXAMINER In | itist If reference considered at the constant of the constant | Considered | V/ 11/5 |

reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

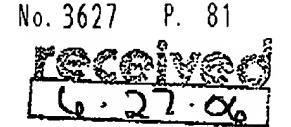
1 Applicant's unique citation designation number (optional). 2 Applicant is to place a chack mark here if English language Translation is attached. This collection of information is required by 37 CFR 1.88. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Commissioner for Detection D. Roy 1450. Alabandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Page 2 of 2

Disclaimer: The only basis for a valid Lottery claim is compliance with the Lottery Statute and the Lottery Rules. Lottery claim may be premised on human, electronic, or other error in the communication, display or transmissio however recorded, displayed, or transmitted. No valid Lottery claim can be premised upon any intentional human electronic, or other form of communication or transmission of data, which has not been authorized by the Lo Commissioner.

Authority: Act 239, 1972, as amended.

Copyright © 2001-2005 State of Michlgan





### United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE, United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uppo.gov

| PPLICATION NO.            | FILING DATE      | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO |
|---------------------------|------------------|----------------------|---------------------|-----------------|
| 09/458,280                | 12/10/1999       | RICHARD C. VOGEL     | VAC.331.1           | 8678            |
| <b>30159 759</b>          | 90 06/23/2006    |                      | EXAM                | INER            |
| LEGAL DEPA<br>KINETIC CON | RTMENT INTELLECT | UAL PROPERTY         | DEMILLE, T          | PANTON D        |
| P.O. BOX 65950            |                  |                      | ART UNIT            | PAPER NUMBER    |
| SAN ANTONIO               | ), TX 78265-9508 |                      | 3754                |                 |
|                           |                  |                      |                     |                 |

DATE MAILED: 06/23/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

DOCKET DATE: Sep. 23, 2006

OOCKET FOR: REAL

POCKET BY:



#### United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address -

## NOTICE UNDER 37 CFR 1.251 - Pending Application

The file of the above-identified application cannot be located after a reasonable search. Therefore, the Office is initiating the resonstruction of the file of the above-identified application pursuant to the provisions of 37 CFR 1.251.

Applicant is given a period of THREE (3) MONTHS from the mailing date of this notice within which to provide a copy of applicant's record (if any) of all of the correspondence between the Office and applicant for the above-identified application (except record of all of the correspondence between the Office and the applicant for the above-identified application (except for U.S. patent documents), and whether applicant is aware of any correspondence between the Office and applicant for the above-identified application that is not among applicant's records.

☐ The following paper(s) pertaining to the above-identified application cannot be located after a reasonable search:

Therefore, the Office is initiating the reconstruction of such paper(s) pursuant to the provisions of 37 CFR 1.251.

Applicant is given a period of THREE (3) MONTHS from the mailing date of this notice within which to provide a copy of the paper(s) listed above and a statement that the copy of such paper(s) is a complete and accurate copy of applicant's record of such paper(s).

Alternatively, applicant may reply to this notice by producing applicant's record (if any) of all of the correspondence between the Office and the applicant for the above-identified applicant for the Office to copy (except for U.S. patent documents), and provide a statement that the papers produced by applicant are applicant's complete record of all of the correspondence between the Office and the applicant for the above-identified application (except for U.S. patent documents), whether applicant is aware of any correspondence between the Office and the applicant for the above-identified application that is not among applicant's records. Such records must be brought to the Customer Service Center in the Office of Initial Patent Examination (Crystal Plaza 2, 2011 South Clark Place, Arlington, VA 22202).

If applicant does not possess any record of the correspondence between the Office and the applicant for the above-identified application (or any copy of the paper(s) listed above), applicant must reply to this notice by providing a statement that applicant does not possess any record of the correspondence between the Office and the applicant for the above-identified application.

Failure to reply to this notice in a timely manner will result in abandonment of the above-identified application. The three-mouth period for reply to this notice may be extended (up to a maximum of six months) under the provisions of 37 CFR 1.136(a). However, failure to reply within this three-mouth period will result in a reduction of any patent term adjustment. See 37 CFR 1.704(b).

A printout from PALM of the contents of the file of the above-identified application is included with this notice.

Direct the reply to this notice to:

Mail Stop RECONSTRUCTION
Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

Direct questions concerning this notice to:

(571) 273-4333

PTO-2053-A (Rev. 10/03)

PAGE 82/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

| 0. 2006 12:25PM KC                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ,                                                                                                                                                                                                                                                                                                                                    | · M                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | t' Garalya                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | & oeur                                                                                                                 | TE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 370                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Carolyn Brow<br>Supervisory Legal Instrum<br>Group 3700<br>Under the Paperwork Reduction A                                                                                                                                                                                                                                           | VIII<br>N <b>EAT EXAMINET</b><br>Act of 1995, no persons are require                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | U.S. Patent and d to respond to a collection of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Approved for use<br>Trademark Office; U<br>information unless i                                                        | PTO-2<br>through 07/31/200<br>S. DEPARTMEN<br>displays a valid O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 2053-B (8<br>06. CMB (<br>VT OF CO<br>MB contri                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| In re Application of:                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | -                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Application No.:                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Filing Date:                                                                                                                                                                                                                                                                                                                         | ***************************************                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Title:                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| ·                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Direct to:                                                                                                                                                                                                                                                                                                                           | Mail Stop RE<br>Commissione<br>P.O. Box 1456                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                        | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| •                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | irginia 223 (3-1450                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| NOT                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | irginia 223 [3-1450                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ling Applic                                                                                                            | ation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| NOT: Statement (check the approp                                                                                                                                                                                                                                                                                                     | Alexandria, V ICE UNDER 37 C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | irginia 223 [3-1450                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ling Applic                                                                                                            | ation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                      | Alexandria, V  ICE UNDER 37 C  priate box):  this reply is a complete and plicant for the above-identic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | irginia 22313-1450  FR 1.251 - Pend  ad accurate copy of application (excen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | plicant's record                                                                                                       | of all of the c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Statement (check the approp                                                                                                                                                                                                                                                                                                          | Alexandria, V  ICE UNDER 37 C  Priate box):  this reply is a complete and plicant for the above-identificance between the Office at                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | irginia 22313-1450  FR 1.251 - Pend  ad accurate copy of application (excepted applicant for the above                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | plicant's record<br>t for U.S. patent<br>ove-identified s                                                              | of all of the condocuments), as pplication that                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | nd applic<br>is not a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Statement (check the appropriate of the copy submitted with between the Office and the appropriate aware of any corresponde applicant's records.  The copy of the paper(s) list such paper(s).  The papers produced by apparent applicant for the above-identical contents.                                                          | Alexandria, V  ICE UNDER 37 C  Priate box):  this reply is a complete are plicant for the above-identicance between the Office at the interest and in the notice under 37 C  plicant are applicant's complished application (except                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | FR 1.251 - Pend accurate copy of application (excepted applicant for the above FR 1.251 is/are a complete record of all of the for IIS matery documents.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | plicant's record t for U.S. patent ove-identified a                                                                    | of all of the continents), as polication that copy of application the Copy of application the Copy of application the Copy of application the Copy of application to the Copy of application the Copy of application to the Copy of applicati | nd applicing the second |
| Statement (check the appropriate of the copy submitted with between the Office and the appropriate aware of any corresponde applicant's records.  The copy of the paper(s) list such paper(s).                                                                                                                                       | Alexandria, V  ICE UNDER 37 C  priate box):  this reply is a complete an plicant for the above-identicance between the Office at the internal are applicant's complified application (except ffice and the applicant for the applica | irginia 22313-1450  FR 1.251 - Pend  id accurate copy of application (excepted applicant for the above-  FR 1.251 is/are a complete record of all of the for U.S. patent documes above-identified applicant for applicant for units above-identified applicant for units above | plicant's record t for U.S. patent ove-identified a ete and accurate correspondence tents), and application that is no | of all of the condocuments), and polication that copy of application the Copy of application is not a stamong application applications.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | nd applicis not a suit's reconstruction of the suit's reconstruction of th |
| Statement (check the appropriate of the copy submitted with between the Office and the appropriate aware of any corresponde applicant's records.  The copy of the paper(s) list such paper(s).  The papers produced by apparent for the above-identic correspondence between the Office and possess and possess are such papers.     | Alexandria, V  ICE UNDER 37 C  priate box):  this reply is a complete an plicant for the above-identicance between the Office at the internal are applicant's complified application (except ffice and the applicant for the applica | irginia 22313-1450  FR 1.251 - Pend  id accurate copy of application (excepted applicant for the above-  FR 1.251 is/are a complete record of all of the for U.S. patent documes above-identified applicant for applicant for units above-identified applicant for units above | plicant's record t for U.S. patent ove-identified a ete and accurate correspondence tents), and application that is no | of all of the condocuments), and polication that copy of application the Copy of application is not a stamong application applications.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | nd applicis not a suit's reconstruction of the suit's reconstruction of th |
| Statement (check the appropriate of the copy submitted with between the Office and the appropriate aware of any corresponde applicant's records.  The copy of the paper(s) list such paper(s).  The papers produced by appropriate for the above-identic correspondence between the Office applicant does not possess a application. | Alexandria, V  ICE UNDER 37 C  priate box):  this reply is a complete an plicant for the above-identicance between the Office at the internal are applicant's complified application (except ffice and the applicant for the applica | irginia 22313-1450  FR 1.251 - Pend  id accurate copy of application (excepted applicant for the above-  FR 1.251 is/are a complete record of all of the for U.S. patent documes above-identified applicant for applicant for units above-identified applicant for units above | plicant's record t for U.S. patent ove-identified a ete and accurate correspondence tents), and application that is no | of all of the condocuments), and polication that copy of application the Copy of application is not a stamong application applications.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | nd applicis not a suit's reconstruction of the suit's reconstruction of th |
| Statement (check the appropriate of the copy submitted with between the Office and the appropriate aware of any corresponde applicant's records.  The copy of the paper(s) list such paper(s).  The papers produced by apparent for the above-identic correspondence between the Office and possess and possess are such papers.     | Alexandria, V  ICE UNDER 37 C  priate box):  this reply is a complete at plicant for the above-identicence between the Office at ted in the notice under 37 C  plicant are applicant's complified application (except fice and the applicant for the any record of the correspondence of the c | irginia 22313-1450  FR 1.251 - Pend  id accurate copy of application (excepted applicant for the above-  FR 1.251 is/are a complete record of all of the for U.S. patent documes above-identified applicant for applicant for units above-identified applicant for units above | plicant's record t for U.S. patent ove-identified a ete and accurate correspondence tents), and application that is no | of all of the condocuments), and polication that copy of application the Copy of application is not a stamong application applications.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | nd applicing is not a surface and applice and applice and applications of the contract of the  |

## A copy of this notice should be returned with the reply.

Burden Hour Statement: This collection of information is required by 37 CFR 1.251. The information is used by the public to reply to a request for copies of correspondence between the applicant and the USPTO in order to reconstruct an application file. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 60 minutes to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, Virginia 22313-1450, DO NOT SEND PRES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

PTO-2053-B (Rev. 10/03)

PAGE 83/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

Day: Thursday Date: 6/22/2006

Time: 15:27:05

# PALM INTRANET

# Content Information for 09/458280

Search Another: Application# or Patent# PCT / or PG PUBS # Attorney Docket # Bar Code #

| ESPECIAL CONTRACTOR | Contents |         | SEALURACES ENDINGERS SERVICE S |
|---------------------|----------|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date                | Status   | Code    | Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 06/23/2006          |          | M2510   | MAIL RECONSTRUCTION NOTICE - PENDING APPLIC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 06/22/2006          |          | 2510    | RECONSTRUCTION NOTICE UNDER 37 CFR 1.251 - PE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 06/21/2006          |          | LFRECON | RECONSTRUCTION OF FILE - BEGIN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 05/08/2006          |          | LFLOST  | FILE MARKED LOST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 08/31/2005          | 94       | IFEE    | ISSUE FEE PAYMENT RECEIVED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 07/20/2005          |          | C.ADB   | CORRESPONDENCE ADDRESS CHANGE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 06/01/2005          | 93.      | MN/=.   | MAIL NOTICE OF ALLOWANCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 05/31/2005          | 90       | N/=.    | NOTICE OF ALLOWANCE DATA VERIFICATION COM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 05/31/2005          | 89       | CNTA    | NOTICE OF ALLOWABILITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 02/14/2005          |          | M844    | INFORMATION DISCLOSURE STATEMENT (IDS) FILE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 05/31/2005          | •        | FWDX    | DATE FORWARDED TO EXAMINER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 02/14/2005          | 71       | RCEX    | REQUEST FOR CONTINUED EXAMINATION (RCE)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 05/31/2005          |          | ABN9    | DISPOSAL FOR A RCE/CPA/129 (EXPRESS ABANDON)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 02/18/2005          | 91       | P006    | RECORD PETITION DECISION OF GRANTED TO WITH                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 02/14/2005          |          | PET.    | PETITION ENTERED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 02/14/2005          |          | WPET    | WORKFLOW INCOMING PETITION IFW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 02/14/2005          |          | BRCE    | WORKFLOW - REQUEST FOR RCE - BEGIN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 01/28/2005          |          | SENT    | WORKFLOW - FILE SENT TO CONTRACTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 01/28/2005          |          | R1021   | RECEIPT INTO PUBS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 01/21/2005          | 94       | IFEE    | ISSUE FEE PAYMENT RECEIVED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 12/27/2004          | 92       |         | MAIL NOTICE OF ALLOWANCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 12/22/2004          | 90       | N/=.    | NOTICE OF ALLOWANCE DATA VERIFICATION COM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 12/22/2004          | 89       |         | NOTICE OF ALLOWABILITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 10/15/2004          |          |         | DATE FORWARDED TO EXAMINER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 08/17/2004          | 121      |         | APPEAL BRIEF FILED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                     |          |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

| 61<br>60<br>71<br>41<br>40 | N/AP XT/G XT/G XT/G WPET IRFND MCTFR CTFR FWDX A XT/G | REQUEST FOR EXTENSION OF TIME - GRANTED  NOTICE OF APPEAL FILED  REQUEST FOR EXTENSION OF TIME - GRANTED  REQUEST FOR EXTENSION OF TIME - GRANTED  WORKFLOW INCOMING PETITION IFW  REQUEST FOR REFUND  MAIL FINAL REJECTION (PTOL - 326)  FINAL REJECTION  DATE FORWARDED TO EXAMINER  RESPONSE AFTER NON-FINAL ACTION |
|----------------------------|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 71 41                      | XT/G WPET IRFND MCTFR CTFR FWDX A                     | REQUEST FOR EXTENSION OF TIME - GRANTED  REQUEST FOR EXTENSION OF TIME - GRANTED  WORKFLOW INCOMING PETITION IFW  REQUEST FOR REFUND  MAIL FINAL REJECTION (PTOL - 326)  FINAL REJECTION  DATE FORWARDED TO EXAMINER  RESPONSE AFTER NON-FINAL ACTION                                                                  |
| 71 41                      | WPET IRFND MCTFR CTFR FWDX A                          | REQUEST FOR EXTENSION OF TIME - GRANTED WORKFLOW INCOMING PETITION IFW REQUEST FOR REFUND MAIL FINAL REJECTION (PTOL - 326) FINAL REJECTION DATE FORWARDED TO EXAMINER RESPONSE AFTER NON-FINAL ACTION                                                                                                                 |
| 71 41                      | IRFND MCTFR CTFR FWDX A                               | WORKFLOW INCOMING PETITION IFW REQUEST FOR REFUND MAIL FINAL REJECTION (PTOL - 326) FINAL REJECTION DATE FORWARDED TO EXAMINER RESPONSE AFTER NON-FINAL ACTION                                                                                                                                                         |
| 71 41                      | MCTFR CTFR FWDX A                                     | REQUEST FOR REFUND  MAIL FINAL REJECTION (PTOL - 326)  FINAL REJECTION  DATE FORWARDED TO EXAMINER  RESPONSE AFTER NON-FINAL ACTION                                                                                                                                                                                    |
| 71 41                      | CTFR<br>FWDX<br>A                                     | MAIL FINAL REJECTION (PTOL - 326) FINAL REJECTION  DATE FORWARDED TO EXAMINER  RESPONSE AFTER NON-FINAL ACTION                                                                                                                                                                                                         |
| 71                         | FWDX<br>A                                             | FINAL REJECTION  DATE FORWARDED TO EXAMINER  RESPONSE AFTER NON-FINAL ACTION                                                                                                                                                                                                                                           |
| 41                         | A                                                     | RESPONSE AFTER NON-FINAL ACTION                                                                                                                                                                                                                                                                                        |
| 41                         |                                                       | RESPONSE AFTER NON-FINAL ACTION                                                                                                                                                                                                                                                                                        |
|                            | XT/G                                                  |                                                                                                                                                                                                                                                                                                                        |
|                            |                                                       | REQUEST FOR EXTENSION OF TIME - GRANTED                                                                                                                                                                                                                                                                                |
| 40                         | MCTNF                                                 | MAIL NON-FINAL REJECTION                                                                                                                                                                                                                                                                                               |
|                            | CTNF                                                  | NON-FINAL REJECTION                                                                                                                                                                                                                                                                                                    |
|                            | FWDX                                                  | DATE FORWARDED TO EXAMINER                                                                                                                                                                                                                                                                                             |
|                            | AMSB                                                  | AMENDMENT SUBMITTED/ENTERED WITH FILING C                                                                                                                                                                                                                                                                              |
|                            | FWDX                                                  | DATE FORWARDED TO EXAMINER                                                                                                                                                                                                                                                                                             |
| 71                         | ACPA                                                  | CONTINUING PROSECUTION APPLICATION - CONTIN                                                                                                                                                                                                                                                                            |
|                            | ABN9                                                  | DISPOSAL FOR A RCE/CPA/129 (EXPRESS ABANDON)                                                                                                                                                                                                                                                                           |
|                            | BCPA                                                  | WORKFLOW - REQUEST FOR CPA - BEGIN                                                                                                                                                                                                                                                                                     |
| 61                         | MCTFR                                                 | MAIL FINAL REJECTION (PTOL - 326)                                                                                                                                                                                                                                                                                      |
| 60                         | CTFR                                                  | FINAL REJECTION                                                                                                                                                                                                                                                                                                        |
|                            | FWDX                                                  | DATE FORWARDED TO EXAMINER                                                                                                                                                                                                                                                                                             |
| 71                         | A                                                     | RESPONSE AFTER NON-FINAL ACTION                                                                                                                                                                                                                                                                                        |
|                            | MNRAB                                                 | MAIL NOTICE OF RESCINDED ABANDONMENT                                                                                                                                                                                                                                                                                   |
| 41                         | NRAB                                                  | NOTICE OF RESCINDED ABANDONMENT IN TCS                                                                                                                                                                                                                                                                                 |
|                            | C.AD                                                  | CORRESPONDENCE ADDRESS CHANGE                                                                                                                                                                                                                                                                                          |
|                            | PA.                                                   | CHANGE IN POWER OF ATTORNEY (MAY INCLUDE.                                                                                                                                                                                                                                                                              |
|                            | PREV                                                  | PETITION TO REVIVE APPLICATION - GRANTED                                                                                                                                                                                                                                                                               |
|                            | PET.                                                  | PETITION ENTERED                                                                                                                                                                                                                                                                                                       |
|                            | MABN2                                                 | MAIL ABANDONMENT FOR FAILURE TO RESPOND T                                                                                                                                                                                                                                                                              |
| 61                         |                                                       | ABANDONMENT FOR FAILURE TO RESPOND TO OFF                                                                                                                                                                                                                                                                              |
|                            | MM327                                                 | MAIL MISCELLANEOUS COMMUNICATION TO APPL                                                                                                                                                                                                                                                                               |
|                            | M327                                                  | MISCELLANEOUS COMMUNICATION TO APPLICANT                                                                                                                                                                                                                                                                               |
| 41                         |                                                       | MAIL NON-FINAL REJECTION                                                                                                                                                                                                                                                                                               |
| 40                         |                                                       | NON-FINAL REJECTION                                                                                                                                                                                                                                                                                                    |
|                            |                                                       | INFORMATION DISCLOSURE STATEMENT (IDS) FILE                                                                                                                                                                                                                                                                            |
| 80                         | DOCK                                                  | CASE DOCKETED TO EXAMINER IN GAU                                                                                                                                                                                                                                                                                       |
|                            | 60<br>71<br>41<br>61<br>41<br>40                      | AMSB FWDX 71 ACPA ABN9 BCPA 61 MCTFR 60 CTFR FWDX 71 A MNRAB 41 NRAB 41 NRAB C.AD PA PREV PET. MABN2 ABN2 ABN2 ABN2 MM327 ABN2 MM327 ABN2 ABN4 ABN4 ABN4 ABN4 ABN4 ABN4 ABN4 ABN4                                                                                                                                      |

PAGE 85/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

| 1/11/2000 |    | SCAN | APPLICATION DISPATCHED FROM OIPE  IFW SCAN & PACR AUTO SECURITY REVIEW |
|-----------|----|------|------------------------------------------------------------------------|
| 2/14/1999 | 19 | IEXX | INITIAL EXAM TEAM NN                                                   |

To go back use Back button on your browser toolbar.

Back to PALM | ASSIGNMENT | OASIS | Home page

## **Auto-Reply Facsimile Transmission**



TO:

Fax Sender at 210 255 6969.

Fax Information Date Received: Total Pages:

8/31/2005 4:23:48 PM [Eastern Daylight Time]

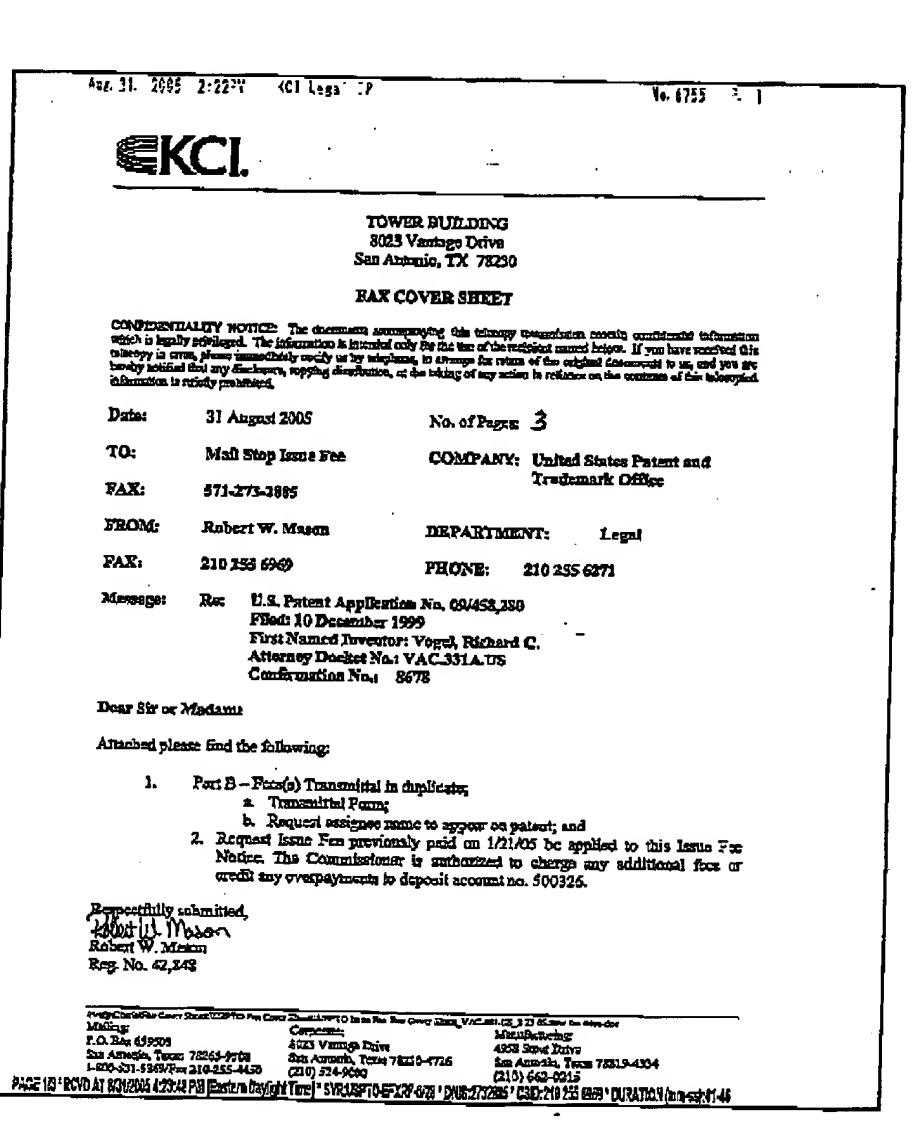
3 (Including cover page)

ADVISORY: This is an automatically generated return receipt confirmation of the facsimile transmission received by the Office. Please check to make sure that the number of pages listed as received in Total Pages above matches what was intended to be sent. Applicants are advised to retain this receipt in the unlikely event that proof of this facsimile transmission is necessary. Applicants are also advised to use the certificate of facsimile transmission procedures set forth in 37 CFR 1.8(a) and (b), 37 CFR 1.6(f). Trademark Applicants, also see the Trademark Manual of Examining Procedure (TMEP) section 306 et seq.

Received Cover Page

=====>





I hereby certify that on 10 February 2005, that the following was deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: MAIL STOP 313(c), Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, this postcard acknowledges receipt of the following:

1. Fee Transmittal for FY 2005 in duplicate for accounting purposes;

2. Petition Fee Under 37 CFR 1.17 (f),(g), & (h) Transmittal;

3. Petition Under 37 CFR 1.313(c)(2) to Withdraw from Issue (1 page);

4. Request for Continued Examination (RCE).
Transmittal (1 page);

5. Information Disclosure Statement (1page)

6. Form PTO/SB/08A (7 pages) & reference copies of non-US patents and articles; and

7. Self-addressed itemized postcard to be returned upon receipt.

File: VAC.331A,US

I hereby certify that on 10 February 2005, that the following was deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: MAIL STOP 313(c), Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, this postcard acknowledges receipt of the following:

Fee Transmittal for FY 2005 in duplicate for accounting purposes;

Petition Fee Under 37 CFR 1.17 (f),(g), & (h) Transmittal;

Petition Under 37 CFR 1.313(c)(2) to Withdraw from Issue (1 page);

Request for Continued Examination (RCE) Transmittal (1 page);

Information Disclosure Statement (lpage)

Form PTO/SB/08A (7 pages) & reference copies of non-US patents and articles; and

Self-addressed itemized postcard to be returned upon receipt.

File: VAC.331A.US

## **Auto-Reply Facsimile Transmission**



TO:

CI Legs P

Fax Sender at 210 255 6969

Fax Information Date Received:

1/21/2005 3:03:44 PM [Eastern Standard Time]

Total Pages: 3 (including cover page)

ADVISORY: This is an automatically generated return receipt confirmation of the facsimile transmission received by the Office. Please check to make sure that the number of pages listed as received in Total Pages above matches what was intended to be sent. Applicants are advised to retain this receipt in the unlikely event that proof of this facsimile transmission is necessary. Applicants are also advised to use the certificate of facsimile transmission procedures set forth in 37 CFR 1.8(a) and (b), 37 CFR 1.6(f). Trademark Applicants, also see the Trademark Manual of Examining Procedure (TMEP) section 306 et seg.

Received Cover Page

**EKCI** 

Jen. 21, 2005 2:55-4

MANUFACTURING BUILDING 8023 Vaniage Drive Sen Antonio, IX 78230

#### FAX COVERSHEET

CONTIDENTIALITY NOTICE: The downtests accompanies intentity operations continued to temperate which is legally privileged. The information is intentied only for the west of the project according to the west of the receipt in according to the project according to the region of the relative of the region of the relative information is griffly professed.

Date:

21 January 2005

No. of Pages: 3

TO:

Mail Stop Issue Fee

COMPANY: United States Patent and

Trademark Office

PAX:

703-746-4000

FROM

RW. Mason

DEPARTMENT:

Legal

FAX:

210 255 6969

PHÔNE:

210 255 6271

Message:

U.S. Patent Application No. 09/458,280

Filed: December 18, 1999
Next Named Inventor: Vocal R

First Named Inventor: Voget, Richard C. Art Unit: 3764

Confirmation No.: 8678

Attorney Docket No.: VAC.331A.US

Dear Sir or Madama

1-800-531-5369/7±x 210-355-4450

Attached in reference to the above-identified potent application, please find the following:

1. Part B - Poss(s) Transmittal in complicate;

(210) 524-0000

- A Pay Issue Fees of \$1,400.00
- b. Request and guee name to appear on petent
- c. Authorization payment of issue fee of \$1,400.00 from Deposit
  Account Number: 500326 Kinetic Concepts, Inc.

Find Constitution for the Constitution of the Constitution for the Const

Manufacturing
4958 Stord Drive
569 Advisio, Torne 75219-6224

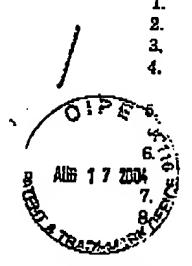
PAGE 1/3 ' REVO AT 1/21/2006 7:10:14 PM (Eastern Standard Time) " SVR: LEFT D-EFY27-41 " DATE: 74/4/2000 " CAD-210 244 8469 " DURATION (extracted) - 28

PAGE 89/93 \* RCVD AT 9/20/2006 1:00:12 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/22 \* DNIS:2738300 \* CSID:210 255 6969 \* DURATION (mm-ss):32-14

I hereby certify that on 17 August! with the U.S. Postal Service Exprethic postcard acknowledges receipt

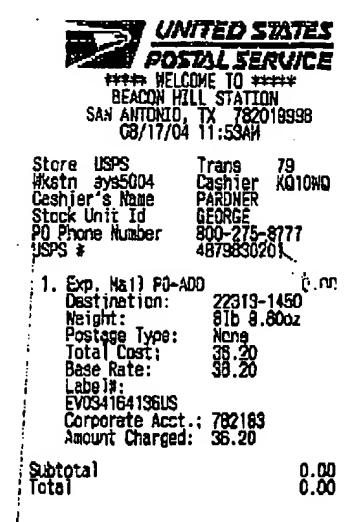
- 1. Submission of Brief
- 2. Transmittal Form (:
- 3. Fee Transmittal in (
  4. Petition for Extension page):
- Appeal Brief (33 : triplicate;

I hereby certify that on 17 August 2004, that the following was deposited with the U.S. Postal Service Express Mail #EV034164136US. Return of this postcard acknowledges receipt of the following:

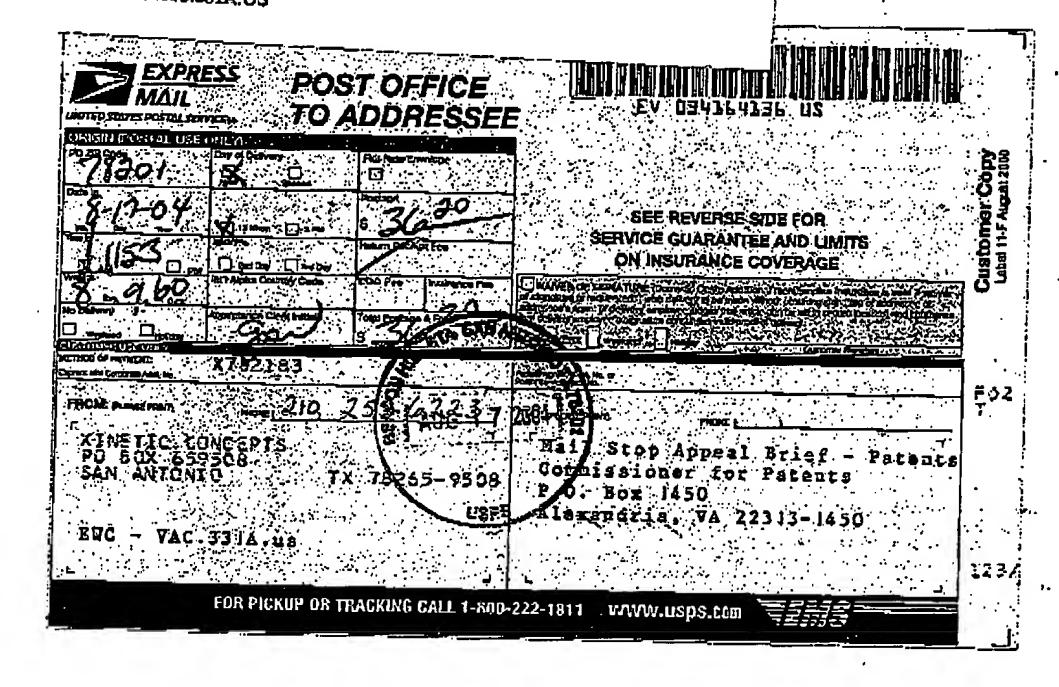


Submission of Brief on Appeal Cover Letter (1 page);
Transmittel Form (1 page);
For Transmittel in duplicate for accounting purposes;
Petition for Extension of Time Under 37 CFR 1.126(a) (1 page);
Appeal Brief (33 pages with 5 appendix pages), in triplicate;
Exhibits to Appeal Brief in triplicate (15 Exhibits bound);
Cortificate of Mailing Under 37 CFR 1.5; and
Self-addressed itemized postcard to be returned upon

File #VAC.831A.US



Wimber of Items Sold: 1
"CASH BACK" with your ATM/DEBIT Card and no fees charged !!!



**Auto-Reply Facsimile Transmission** 



TO:

Fax Sender at 210 255 4440

Fax Information

Date Received: Total Pages:

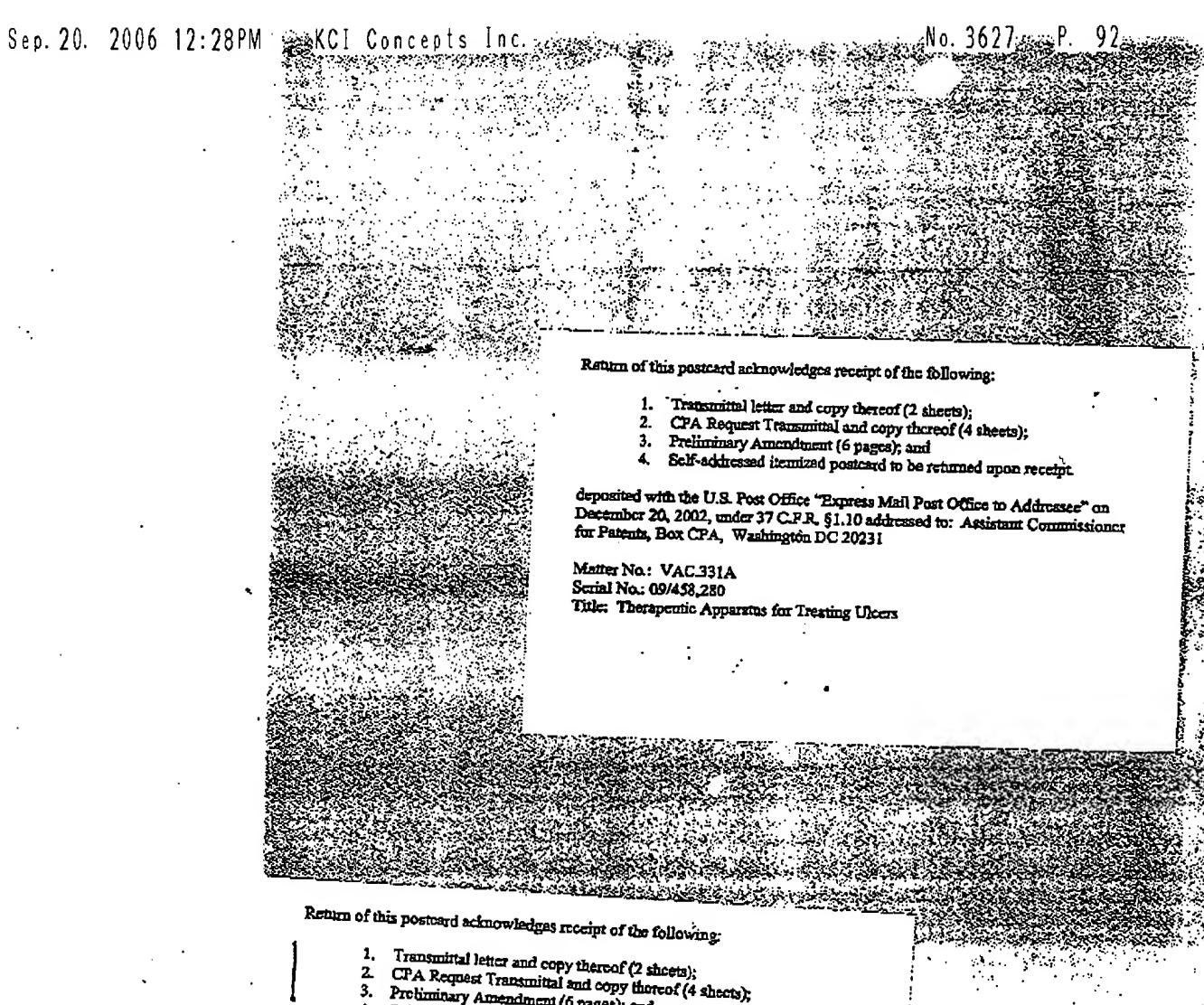
5/24/2004 3:37:42 PM [Eastern Daylight Time]

6 (including cover page)

ADVISORY: This is an automatically generated return receipt confirmation of the facsimile transmission received by the Office. Please check to make sure that the number of pages listed as received in Total Pages above matches what was intended to be sent. Applicants are advised to retain this receipt in the unlikely event that proof of this facsimile transmission is necessary. Applicants are also advised to use the certificate of facsimile transmission procedures set forth in 37 CFR 1.8(a) and (b), 37 CFR 1.6(f). Trademark Applicants, also see the Trademark Manual of Examining Procedure (TMEP) section 306 et seq.

Received Cover Page

|    | Æ1                                            | <i></i>                               | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | · · · · · · · · · · · · · · · · · · ·                                                                                                                                                                                                                        |     |
|----|-----------------------------------------------|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| ٠. |                                               |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                                                                                                                                                                                                                                            | •   |
|    |                                               |                                       | COPPORATE BUILL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | TING                                                                                                                                                                                                                                                         |     |
|    | •                                             |                                       | 8023 Variage Day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ·                                                                                                                                                                                                                                                            | •   |
|    |                                               |                                       | 8an Americ, TX 78<br>Phone (216) 255-45                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 4 <b>5</b>                                                                                                                                                                                                                                                   | •   |
|    |                                               |                                       | F=x (210) 255-696                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | •                                                                                                                                                                                                                                                            |     |
|    |                                               | •                                     | Fax Cover She                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | et '                                                                                                                                                                                                                                                         | •   |
|    | majoiett m<br>triaptere, t<br>disclosive,     | soci below. If                        | Not produced this rejective to a second to | which the contents of the statesphil<br>of and part to bands position that my<br>come, please homeomicly maily as by<br>the and part to bands position that my<br>distance on the contents of this statesphil<br>distance on the contents of this statesphil | ·   |
|    | TATE                                          | May 24, 2004                          | <b>.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                              |     |
|    | TCs .                                         | U.S. Patrol C                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | FAIC783-872-8308                                                                                                                                                                                                                                             |     |
|    | FROM                                          | Efc.W. Comy                           | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | PHONE                                                                                                                                                                                                                                                        | •   |
|    | Number of<br>RB                               | Patient App.                          | CENTRE   230 CENTRE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                              | •   |
|    | •                                             |                                       | KAPEUTIC APPARATUS FOR TI<br>mber 10, 1988<br>Icznies, Denion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | REATING ULCERS*                                                                                                                                                                                                                                              |     |
| •  |                                               | At Us 2 378                           | vaejsiaus                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                              |     |
|    | -<br>Enclosed:<br>1. 1. 2. 1                  | Transmitted Form                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                                                                                                                                                                                                                                            | , * |
|    |                                               | Petition for 3 Mo<br>Votice of Appeal | CONCIPE AND A PROPERTY OF THE P                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 27); andi                                                                                                                                                                                                                                                    |     |
|    |                                               | 0                                     | Stall Paragraph                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                              |     |
|    | ,                                             | ماري                                  | ish. Campan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | •                                                                                                                                                                                                                                                            | •   |
|    | •                                             | •                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                              |     |
|    |                                               | ·                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                              |     |
| ,  | Medius<br>J.O. Bert 659900<br>See Arterio Ter | )<br>as 78265-8509                    | Carpanian<br>\$023 Vanings Dairys<br>Sin Aningso, Texas 7922 (t) 725                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Maria Charles<br>1933 Septe Daires<br>Sen Ankerio, Texas 78115-4334                                                                                                                                                                                          |     |



- Proliminary Amendment (6 pages); and
- Self-addressed immized postcard to be returned upon receipt.

deposited with the U.S. Post Office "Express Mail Post Office to Addressee" on December 20, 2002, under 37 C.F.R. §1.10 addressed to: Assistant Commissioner for Patents, Box CPA. Washington DC 20231

Maner No.: VAC.331A Serial No.: 09/458,280

Title: Therspeutic Apparatus for Treating Ulcers



